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| Fill in this information to identify your case: |                               |
|---|-------------------------------|
| United States Bankruptcy Court for the:         |                               |
| Northern District of: Illinois (State)          |                               |
| Case number (if known)                          | Chapter you are filing under: |
|   | Chapter 7 Chapter 11          |
|   | ☐ Chapter 12 ☐ Chapter 13     |

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself  |                            |   |
|--|----------------------------|---|
|  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name   | Sarai<br>First name        | First name                                    |
| Write the name that is on<br>your government-issued<br>picture identification (for | Middle name                | Middle name                                   |
| example, your driver's license or passport   | Marks<br>Last name         | Last name                                     |
| Bring your picture identification to your meeting with the trustee.                | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| All other names you have used in the last 8 years                                  | First name                 | First name                                    |
| Include your married or  | Middle name                | Middle name                                   |
| maiden names.  | Last name                  | Last name                                     |
|  | First name                 | First name                                    |
|  | Middle name                | Middle name                                   |
|  | Last name                  | Last name                                     |
| 3. Only the last 4 digits of your Social   | XXX - XX- 2231             | xxx - xx-                                     |
| Security number or federal Individual  | OR                         | OR  |
| Taxpayer Identification number (ITIN)  | 9 xx - xx-                 | 9 xx - xx-                                    |

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| D  | ebtor 1 Sarai<br>First Name                            | Marks Middle Name Last Name  | Case number (if known)   |
|----|--|--|--|
|    | i ii st ivaine   | Wildele Warie Last Warie   |  |
|    |  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4. | Any business names and Employer                        | I have not used any business names or EINs.  | I have not used any business names or EINs.  |
|    | Identification Numbers (EIN) you have used in the last | Business name  | Business name  |
|    | 8 years  | Business name  | Business name  |
|    | Include trade names and doing business as names        | EIN  | EIN  |
|    |  | EIN  | EIN  |
| 5. | Where you live   |  | If Debtor 2 lives at a different address:  |
|    |  | 7617 S. Cole, Apt 3B  Number Street  | Number Street  |
|    |  | Chicago Illinois 60639   |  |
|    |  | City State Zip Code Cook   | City State Zip Code  |
|    |  | County   | County   |
|    |  | If your mailing address is different from the one  | If Debtor 2's mailing address is different from yours,   |
|    |  | above, fill it in here. Note that the court will send any  | fill it in here. Note that the court will send any notices to  |
|    |  | notices to you at this mailing address.  | this mailing address.  |
|    |  | Number Street  | Number Street  |
|    |  | City State Zip Code  | City State Zip Code  |
| _  |  | Sign State Zip Godg  | City Clate Lip Code  |
| 6. | Why you are choosing this district                     | Check one:   | Check one:   |
|    | to file for bankruptcy                                 | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
|    |  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   |
|    |  |  |  |
|    |  |  |  |
|    |  |  |  |
|    |  |  |  |
|    |  |  |  |

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| De  | ebtor 1 Sarai   |  | Marks  | (   | Case number <i>(if kno</i>  | own)  |  |
|-----|---|--|--|---|---|---|--|
|     | First Name  | Middle Name  | Last Name  |   |   |   |  |
| Pa  | rt 2: Tell the Court Abo  | ut Your Bankruptcy C   | Case   |   |   |   |  |
| 7.  | The chapter of the<br>Bankruptcy Code you<br>are choosing to file<br>under  |  | description of each, see <i>Notice</i> 10)). Also, go to the top of page <sup>-1</sup>   |   |   |   | viduals Filing for   |
| 8.  | How you will pay the fee  | more details about cashier's check, or may pay with a cre  I need to pay the a Individuals to Pay  I request that my judge may, but is rethe official poverty you choose this or | re fee when I file my petition thow you may pay. Typically, money order. If your attorned the dit card or check with a prepresent in the management of the waited to, waite your fee to the that applies to your famption, you must fill out the Applie it with your petition. | if yo<br>y is so<br>orinte<br>oose<br>ts (Of<br>uest t<br>e, and<br>ily siz | au are paying the<br>ubmitting your<br>ad address.<br>this option, sig<br>fficial Form 103<br>this option only<br>d may do so onl<br>ze and you are u | e fee yourself, yo payment on your and attach the A).  If you are filing to your income unable to pay the | tu may pay with cash, or behalf, your attorney  Application for  for Chapter 7. By law, a is less than 150% of of the in installments). If |
| 9.  | Have you filed for bankruptcy within the last 8 years?  | Ves. District District District  | V  | Vhen<br>Vhen  | MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY  | Case number  Case number  Case number   |  |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District   |  | Vhen  | MM / DD / YYYY  MM / DD / YYYY  | Relationship to yo Case number, if kr Relationship to yo Case number, if kr                               | nownu  |
| 11. | Do you rent your residence?   | ✓ No. Go to  | lord obtained an eviction judgment<br>o line 12.<br>ut <i>Initial Statement About an Evi</i><br>oankruptcy petition.   |   |   | st <i>You</i> (Form 101A)   | and file it with   |

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Debtor 1 Sarai Marks Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Sarai Marks Case number (if known)

#### First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for

waiver of credit counseling with the court.

waiver of credit counseling with the court.

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Debtor 1 Sarai Marks Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded □ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **1**-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do vou estimate that you owe? 100-199 10,001-25,000 More than 100,000 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$10,000,000,001-\$50 billion to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Sarai Marks Signature of Debtor 1 Signature of Debtor 2 Executed on \_\_9/17/2018 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Sarai                                   |                            | Marks                 | Case number (if ki          | nown)  |
|--|----------------------------|-----------------------|-----------------------------|--|
| First Name                                       | Middle Name                | Last Name             |                             |  |
| For your attorney, if you are represented by one | eligibility to proceed und | der Chapter 7, 11, 12 | , or 13 of title 11, United | ave informed the debtor(s) about<br>I States Code, and have explained the<br>so certify that I have delivered to the |
| If you are not                                   | debtor(s) the notice requ  | ired by 11 U.S.C. § 3 | 342(b) and, in a case in w  | hich § 707(b)(4)(D) applies, certify that I  |
| represented by an                                | • •                        |                       |                             | les filed with the petition is incorrect.  |
| attorney, you do not                             | · ·                        | , ,                   |                             | ·  |
| need to file this page.                          | /s/ Mike Miller            |                       | Date                        | 9/17/2018  |
|  | Signature of Attorney f    | or Debtor             | MN                          | M / DD / YYYY  |
|  | ,                          |                       |                             |  |
|  |                            |                       |                             |  |
|  | Mike Miller                |                       |                             |  |
|  | Printed name               |                       |                             |  |
|  | Semrad Law Firm            |                       |                             |  |
|  | Firm name                  |                       |                             |  |
|  | 20 S. Clark Street         |                       |                             |  |
|  | Street                     |                       |                             |  |
|  | 28th Floor                 |                       |                             |  |
|  |                            |                       |                             |  |
|  | Chicago                    |                       | Illinois                    | 60603  |
|  | City                       |                       | State                       | Zip Code   |
|  |                            |                       |                             |  |
|  | Contact phone              | 3122568728            | Email address               | mmiller@semradlaw.com  |
|  |                            |                       | _                           |  |
|  |                            |                       |                             |  |
|  | Bar number                 |                       | State                       |  |

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| Fill in this infor        | mation to identify your ca | ase:        |                      |  |
|---------------------------|----------------------------|-------------|----------------------|--|
| Debtor 1                  | Sarai                      |             | Marks                |  |
|                           | First Name                 | Middle Name | Last Name            |  |
| Debtor 2                  |                            |             |                      |  |
| (Spouse, if filing)       | First Name                 | Middle Name | Last Name            |  |
| United States E           | Sankruptcy Court for the:  | Northern    | District of Illinois |  |
|                           |                            |             | (State)              |  |
| Case number<br>(If known) |                            |             |                      |  |

| Check if this is an |
|---------------------|
| amended filing      |

#### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|  | Your assets<br>Value of what you own      |
|--|---|
| 1. Schedule A/B: Property (Official Form 106A/B)   | Ф0.00                                     |
| 1a. Copy line 55, Total real estate, from Schedule A/B   | \$0.00                                    |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$8,615.00                                |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$8,615.00                                |
| Part 2: Summarize Your Liabilities   |   |
|  | <b>Your liabilities</b><br>Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)                                  | \$0.00                                    |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | <u> </u>                                  |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  | \$0.00                                    |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                     |   |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F                  | \$13,573.00                               |
| Your total liabilities   | \$13,573.00                               |
| Part 3: Summarize Your Income and Expenses   |   |
|  |   |
| 4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I      | \$3,250.49                                |
| 5. Schedule J: Your Expenses (Official Form 106J)  |   |
| Copy your monthly expenses from line 22, Column A, of Schedule J   | \$3,060.00                                |

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| Deb         | otor 1 Sarai  |                               | Marks   | Case number (if known)              |            |
|-------------|---|-------------------------------|---|-------------------------------------|------------|
|             | First Name  | Middle Name                   | Last Name   |                                     |            |
| Part        | Answer These Que  | stions for Administrat        | ive and Statistical Records   |                                     |            |
| 6. <b>A</b> | Are you filing for bankruptcy                                 | under Chapters 7, 11, o       | r 13?   |                                     |            |
| [           | No. You have nothing to                                       | report on this part of the fo | orm. Check this box and submit this   | form to the court with your other s | chedules.  |
| [           | ✓ Yes.  |                               |   |                                     |            |
| 7. <b>V</b> | What kind of debt do you ha                                   | ve?                           |   |                                     |            |
| [           |   |                               | nmer debts are those incurred by an Fill out lines 8-10 for statistical purpo |                                     |            |
| [           | Your debts are not prim this form to the court with           | -                             | ou have nothing to report on this pa  | rt of the form. Check this box and  | submit     |
|             | From the Statement of You<br>Form 122A-1 Line 11; OR, F       |                               | e: Copy your total current monthly orm 122C-1 Line 14.                        | income from Official                | \$3,085.24 |
| 9.          | Copy the following specia                                     | I categories of claims fro    | om Part 4, line 6 of Schedule E/F:  |                                     |            |
|             | From Part 4 on Schedule                                       | E/F, copy the following:      |   | Total claim                         |            |
|             | 9a. Domestic support obliga                                   | ations (Copy line 6a.)        |   | \$0.00                              |            |
|             | 9b. Taxes and certain other                                   | debts you owe the govern      | ment. (Copy line 6b.)   | \$0.00                              |            |
|             | 9c. Claims for death or pers                                  | onal injury while you were i  | intoxicated. (Copy line 6c.)  | \$0.00                              |            |
|             | 9d. Student loans. (Copy lin                                  | e 6f.)                        |   | \$0.00                              |            |
|             | 9e. Obligations arising out of priority claims. (Copy line 6g |                               | or divorce that you did not report as   | \$0.00                              |            |
|             | 9f. Debts to pension or prof                                  | it-sharing plans, and other   | similar debts. (Copy line 6h.)  | \$0.00                              |            |

\$0.00

9g. **Total.** Add lines 9a through 9f.

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| Fill in this                          | information                           | n to identify your c   | ase:  |                       |   |                          |                |   |   |
|---------------------------------------|---------------------------------------|--|---|-----------------------|---|--------------------------|----------------|---|---|
| Debtor 1                              | Sara                                  |  |   |                       | Marks   |                          |                |   |   |
| Debtor 2                              | First                                 | Name   | Middle N  | lame                  | Last Name   |                          |                |   |   |
| (Spouse, if fi                        | ling) First                           | Name   | Middle N  | lame                  | Last Name   |                          |                |   |   |
| United Sta                            | ates Bankru                           | ptcy Court for the:  | Northern  |                       | District of Illinois  |                          |                |   |   |
| Case num                              | nber                                  |  |   |                       | (State)   |                          |                |   |   |
| Officia                               | al Form                               | 106A/B   |   |                       |   |                          |                |   | Check if this is an amended filing  |
| Sche                                  | dule A                                | /B: Prope  | erty  |                       |   |                          |                |   | 12/1  |
| category v<br>responsib<br>write your | where you<br>le for suppl<br>name and | think it fits best. I<br>ying correct infor<br>case number (if k | Be as complete a<br>mation. If more s<br>known). Answer e | nd ac<br>pace<br>very | asset only once. If an asset<br>curate as possible. If two m<br>is needed, attach a separat<br>question.<br>r Other Real Estate You   | arried ped<br>e sheet to | ople a<br>this | re filing together, both a form. On the top of any                      | are equally   |
|                                       |                                       |  | quitable interest i                                       | in any                | residence, building, land, o  | r similar                | prope          | rty?  |   |
|                                       | No. Go to                             |  |   |                       |   |                          |                |   |   |
| 1.1                                   |                                       | e is the property?   | other description   | Wha                   | at is the property? Check all t<br>Single-family home   | hat apply.               |                | the amount of any secu  | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  |
|                                       |                                       |  |   |                       | Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home  | ,                        |                | Current value of the entire property?                                   | Current value of the portion you own?   |
|                                       | Number                                | Street<br>State  | Zip Code  |                       | Land Investment property Timeshare Other  |                          |                | Describe the nature of interest (such as feet the entireties, or a life | simple, tenancy by  |
|                                       |                                       |  |   | one                   | o has an interest in the prop  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and   | ·                        | ck             | Check if this is co<br>(see instructions)                               | ommunity property   |
|                                       |                                       |  |   | Oth                   | er information you wish to a  | dd about                 | this it        | tem, such as local  |   |
| lf vou                                | own or box                            | e more than one, li  | int boro  | pro                   | perty identification number <u>:</u>  |                          |                |   |   |
| 1.2                                   |                                       | e more than one, if  |   |                       | at is the property? Check all the Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home   |                          |                | the amount of any secu  | claims or exemptions. Put<br>ured claims on <i>Schedule D:</i><br>aims Secured by Property.<br>Current value of the<br>portion you own? |
|                                       | Number                                | Street   |   | H                     | Land  |                          |                |   |   |
|                                       |                                       |  |   | R                     | Investment property Timeshare   |                          |                | Describe the nature of interest (such as fee the entireties, or a life  | simple, tenancy by  |
|                                       | City                                  | State  | Zip Code  | one                   | Other  has an interest in the prop  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and  er information you wish to a  perty identification number: | d another                |                | (see instructions)  | ommunity property   |

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| Debtor 1                      |   |   | Marks  | Case number (if known)                  |  |
|-------------------------------|---|---|--|---|--|
|                               | First Name  | Middle Name                                   | Last Name  |   |  |
| 1.3<br>Stre                   | eet address, if available, or oth                                     |   | That is the property? Check all that and Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  | the amount of any se                    | ed claims or exemptions. Put ecured claims on Schedule D: Claims Secured by Property.  Current value of the portion you own? |
| Nur<br>City                   | mber Street   | Zip Code                                      | Land Investment property Timeshare Other   | interest (such as fe                    | e of your ownership<br>e simple, tenancy by<br>life estate), if known.   |
|                               |   |   | ho has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add altroperty identification number: | Check one. (see instruction             | community property<br>ns)  |
|                               | I the dollar value of the port<br>ave attached for Part 1. Writ       | tion you own for al                           | Il of your entries from Part 1, includ   | ling any entries for pages              |  |
| <b>Do you ov</b><br>you own t | that someone else drives. If yo<br>ans, trucks, tractors, sport utili | equitable interest i<br>ou lease a vehicle, a | in any vehicles, whether they are related in any vehicles, whether they are related in any vehicles.   | •                                       | es   |
| 3.1                           |   | GMC<br>Envoy SLE<br>4WD                       | Who has an interest in the proper one.  Debtor 1 only  | the amount of any s                     | red claims or exemptions. Put lecured claims on Schedule D: Claims Secured by Property.                                      |
|                               | Year: Approximate mileage: Other information: 2005 GMC Envoy SLE 4WE  | 2005<br>195000                                | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community p  |   | e Current value of the portion you own? \$2825.00  |
| 3.2                           | Make<br>Model:<br>Year:   |   | who has an interest in the proper one.  Debtor 1 only  | the amount of any s                     | red claims or exemptions. Put<br>secured claims on <i>Schedule D:</i><br><i>Claims Secured by Property.</i>                  |
|                               | Approximate mileage: Other information:                               |   | Debtor 2 only Debtor 1 and Debtor 2 only   | Current value of th<br>entire property? | e Current value of the portion you own?  |

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|     | Sarai  |             | Marks Case num   | nber <i>(if known)</i>  |   |
|-----|--|-------------|--|---|---|
|     | First Name   | Middle Name | Last Name  | <u></u>   |   |
| 3.3 | Make Model: Year: Approximate mileage:  Other information:   |             | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | the amount of any secu  | claims or exemptions. Put<br>ured claims on Schedule D<br>aims Secured by Property.<br>Current value of the<br>portion you own? |
|     |  |             | At least one of the debtors and another  Check if this is community property (see instructions)  |   |   |
| 3.4 | Make Model: Year: Approximate mileage:   |             | Who has an interest in the property? Check one.  Debtor 1 only   | the amount of any secu  | claims or exemptions. Put<br>ured claims on <i>Schedule D</i><br>aims Secured by Property.                                      |
|     | Other information:   |             | Debtor 2 only  Debtor 1 and Debtor 2 only  | Current value of the entire property?   | Current value of the portion you own?   |
|     |  |             | At least one of the debtors and another  Check if this is community property (see  |   |   |
|     | -  | •           | instructions)  er recreational vehicles, other vehicles, and ac , fishing vessels, snowmobiles, motorcycle access  |   |   |
|     | -  | •           | er recreational vehicles, other vehicles, and ac   | ories  Do not deduct secured  | •   |
| Exa | mples: Boats, trailers, motors, p<br>No<br>Yes<br>Make   | •           | er recreational vehicles, other vehicles, and ac<br>, fishing vessels, snowmobiles, motorcycle access<br>Who has an interest in the property? Check  | Do not deduct secured the amount of any secu  | •   |
| Exa | mples: Boats, trailers, motors, p  No  Yes  Make  Model:  Year:  Approximate mileage:                                  | •           | who has an interest in the property? Check one.  Debtor 1 only Debtor 1 and Debtor 2 only  | Do not deduct secured the amount of any secured the amount of any secured the amount of the entire property?  | ured claims on Schedule Daims Secured by Property.  Current value of the  |
| 4.1 | Make Model: Year: Approximate mileage: Other information:  Make Model: Year:  Approximate mileage:  Other information: | •           | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see  | Do not deduct secured the amount of any secured the amount of any secured the entire property?  Do not deduct secured the amount of any secured the | claims or Schedule Daims Secured by Property.  Current value of the portion you own?  claims or exemptions. Put                 |
| 4.1 | Make Model: Other information:  Make Model:  Make Model:  Make Model:  Model:  Model:  Model:  Model:  Model:          | •           | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another instructions)  Who has an interest in the property? Check one. | Do not deduct secured the amount of any secured the amount of any secured the entire property?  Do not deduct secured the amount of any secured the | Current value of the portion you own?  claims or exemptions. Putured claims on Schedule D                                       |

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Debtor 1 Sarai Marks Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture \$1000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Used Electronics - 1 TV, 1 Cell Phone \$400.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$900.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2300.00 for Part 3. Write that number here ......

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Debtor 1 Sarai Marks Case number (if known) First Name Middle Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: PLS - Prepaid Debit \$890.00 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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| Dep. | tor 1 Sarai  | Middle Nove   | Marks                         | Case number (if known)                   |           |
|------|--|---|-------------------------------|--|-----------|
| 20.  |  | orate bonds and other negotiab<br>include personal checks, cashiers'              |                               |  |           |
|      |  | ents are those you cannot transfer  |                               |  |           |
|      | ✓ No  Yes. Give specific information about them    | Issuer name:  |                               |  |           |
|      |  |   |                               |  |           |
|      |  |   |                               |  |           |
| 21.  | Retirement or pension<br>Examples: Interests in IF |   | thrift savings accounts,      | or other pension or profit-sharing plans |           |
|      | No   | Type of account:  | Institution name:             |  |           |
|      | Yes. List each account                             |   |                               |  | *****     |
|      | separately.  | 401(k) or similar plan:   | w/ employer                   |  | \$2300.00 |
|      |  | Pension plan:   |                               |  |           |
|      |  | IRA:  |                               |  | <u></u> - |
|      |  | Retirement account:   |                               |  |           |
|      |  | Keogh:  |                               |  | -         |
|      |  | Additional account:   | -                             |  |           |
|      |  | Additional account:   |                               |  |           |
| 22.  | Your share of all unused                           | prepayments I deposits you have made so that with landlords, prepaid rent, public |                               |  |           |
|      | ✓ Yes  | Electric:   |                               |  |           |
|      |  | Gas:  |                               |  |           |
|      |  | Heating oil:  |                               |  |           |
|      |  | Security deposit on rental unit:  | w/ landlord                   |  | \$300.00  |
|      |  | Prepaid rent:   |                               |  |           |
|      |  | Telephone:  |                               |  |           |
|      |  | Water:  |                               |  |           |
|      |  | Rented furniture:   |                               |  |           |
|      |  | Other:  |                               |  |           |
| 23.  | Annuities (A contract fo                           | or a periodic payment of money to   | you, either for life or for a | number of years)                         | •         |
|      | ✓ No ☐ Yes   | Issuer name and description:  |                               |  |           |
|      |  |   |                               |  |           |
|      |  |   |                               |  |           |
|      |  |   |                               |  |           |

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| Den | tor 1 Sarai   |   |                           | Marks                           | Case number (if known)   |  |
|-----|---|---|---------------------------|---------------------------------|--|--|
| 24. | First Name  Interests in an edu   |   | e Name<br>count in a qual | Last Name                       | nder a qualified state tuition program.  |  |
|     |   | b)(1), 529A(b), and 529   |                           | , 3                             |  |  |
|     | No Instit   | tution name and descr   | iption. Separately        | y file the records of any inte  | rests.11 U.S.C. § 521(c):  |  |
|     |   |   |                           |                                 |  |  |
|     |   |   |                           |                                 |  |  |
| 25. | Trusts, equitable of exercisable for you  |   | property (other           | than anything listed in I       | ine 1), and rights or powers   |  |
|     | ✓ No  Yes. Describe   |   |                           |                                 |  |  |
|     |   |   |                           |                                 |  |  |
| 26. |   | popyrights, trademarks, trade secrets, and other intellectual property Internet domain names, websites, proceeds from royalties and licensing agreements  escribe  franchises, and other general intangibles Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses  escribe  Derty owed to you?  Current value of the portion you own? Do not deduct secured claims or exemptions.  so owed to you  ve specific information out them, including whether ou already flied the returns at direct the testures at the tax years |                           |                                 |  |  |
|     | <b>√</b> No   |   | ,                         | 3                               | ,  |  |
|     | Yes. Describe   |   |                           |                                 |  |  |
| 27. | Licenses franchis   | eee and other genera  | al intangibles            |                                 |  |  |
| 21. |   |   | _                         | e association holdings, liqu    | or licenses, professional licenses   |  |
|     | No Voc Describe   |   |                           |                                 |  | I  |
|     | res. Describe   |   |                           |                                 |  |  |
| Moi | ney or property o   | wed to you?   |                           |                                 |  | portion you own? Do not deduct secured         |
| 28. | Tax refunds owed t  | o you   |                           |                                 |  |  |
|     | No  |   |                           |                                 | Fodovoli   | ¢0.00  |
|     |   |   |                           |                                 | Federal:   | \$0.00   |
|     |   | . •   |                           |                                 |  | 44.44  |
|     | -   | y filed the returns   |                           |                                 |  |  |
| 29. | and the tax   | y filed the returns   |                           |                                 |  |  |
| 29. | and the tax   | y filed the returns<br>x years  | spousal support           | t, child support, maintenan     | Local:   | \$0.00   |
| 29. | Family support Examples: Past due   | y filed the returns<br>x years<br>or lump sum alimony,  | spousal support           | t, child support, maintenan     | Local: ce, divorce settlement, property settlemen  | \$0.00   |
| 29. | Family support Examples: Past due   | y filed the returns<br>x years<br>or lump sum alimony,  | spousal support           | t, child support, maintenan     | Local:  ce, divorce settlement, property settlemen  Alimony:   | \$0.00<br>at<br>\$0.00                         |
| 29. | Family support Examples: Past due   | y filed the returns<br>x years<br>or lump sum alimony,  | spousal suppor            | t, child support, maintenan     | Local:  ce, divorce settlement, property settlement  Alimony:  Maintenance:  | \$0.00<br>at<br>\$0.00<br>\$0.00               |
| 29. | Family support Examples: Past due   | y filed the returns<br>x years<br>or lump sum alimony,  | spousal suppor            | t, child support, maintenan     | Local:  ce, divorce settlement, property settlement  Alimony:  Maintenance:  | \$0.00<br>at<br>\$0.00<br>\$0.00               |
| 29. | Family support Examples: Past due   | y filed the returns<br>x years<br>or lump sum alimony,  | spousal suppor            | t, child support, maintenan     | Local:  ce, divorce settlement, property settlement  Alimony:  Maintenance:  Support:  | \$0.00<br>at<br>\$0.00<br>\$0.00<br>\$0.00     |
|     | Family support  Examples: Past due  No  Yes. Give specifi   | y filed the returns x years   |                           |                                 | Local:  ce, divorce settlement, property settlement  Alimony:  Maintenance:  Support:  Divorce settlement:  Property settlement: | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00 |
|     | and the tax  Family support  Examples: Past due of the past of th | y filed the returns x years   | nce payments, di          | isability benefits, sick pay, v | Local:  ce, divorce settlement, property settlement  Alimony:  Maintenance:  Support:  Divorce settlement:                       | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00 |
|     | and the tax  Family support  Examples: Past due of the past of th | y filed the returns x years   | nce payments, di          | isability benefits, sick pay, v | Local:  ce, divorce settlement, property settlement  Alimony:  Maintenance:  Support:  Divorce settlement:  Property settlement: | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00 |
|     | and the tax  Family support  Examples: Past due  ✓ No  ☐ Yes. Give specifi  Other amounts son  Examples: Unpaid w  Social Sec   | y filed the returns x years   | nce payments, di          | isability benefits, sick pay, v | Local:  ce, divorce settlement, property settlement  Alimony:  Maintenance:  Support:  Divorce settlement:  Property settlement: | \$0.00<br>\$0.00<br>\$0.00<br>\$0.00<br>\$0.00 |

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| Deb <sup>1</sup> | tor 1 Sarai  | Marks  | Case number (if known)                        |   |
|------------------|--|--|---|---|
|                  | First Name Middle  | Name Last Name                               |   |   |
| 31.              | Interests in insurance policies  Examples: Health, disability, or life insurance                                     | e; health savings account (HSA); credit, hom | neowner's, or renter's insurance              |   |
|                  | No  ✓ Yes. Name the insurance company  | Company name:                                | Beneficiary:                                  | Surrender or refund value:              |
|                  | of each policy and list its value  | Term Life through employer                   |   | \$0.00                                  |
|                  |  |  |   |   |
|                  |  |  |   |   |
| 32.              | Any interest in property that is due you for the beneficiary of a living trust, exproperty because someone has died. |  | or are currently entitled to receive          |   |
|                  | ✓ No   |  |   |   |
|                  | Yes. Describe  |  |   |   |
| 33.              | Claims against third parties, whether or Examples: Accidents, employment disputes                                    |  | demand for payment                            |   |
|                  | <u> </u>   | omp - No Attorney retained                   |   |   |
| 34.              | Other contingent and unliquidated clain  | ns of every nature, including countercla     | ims of the debtor and rights                  |   |
|                  | to set off claims  |  |   |   |
|                  | ✓ No  Yes. Describe  |  |   |   |
| 35.              | Any financial assets you did not already   | list   |   |   |
|                  | <b>✓</b> No  |  |   |   |
|                  | Yes. Describe  |  |   |   |
|                  |  |  |   |   |
| 36.              | Add the dollar value of all of your entries for Part 4. Write that number here                                       |  | _   | \$3490.00                               |
|                  |  |  |   |   |
| Part             | 5: Describe Any Business-Related   | Property You Own or Have an Inte             | erest In. List any real estate in Part        | 1.                                      |
| 37.              | Do you own or have any legal or equitab  |  |   |   |
|                  | No. Go to Part 6.  |  |   | urrent value of the<br>ortion you own?  |
|                  | Yes. Go to line 38.  |  |   | o not deduct secured claims rexemptions |
| 38.              | Accounts receivable or commissions you   | u already earned                             |   |   |
|                  | No Voc Describe  |  |   |   |
|                  | Yes. Describe  |  |   |   |
| 39.              | Office equipment, furnishings, and suppl Examples: Business-related computers, sof                                   |  | ines, rugs, telephones, desks, chairs, electr | onic devices                            |
|                  | ✓ No   |  | <u> </u>                                      |   |
|                  | Yes. Describe  |  |   |   |
|                  |  |  |   |   |

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| Deb    | tor 1 Sarai                    | Marks Case number (if known)  |                                       |
|--------|--------------------------------|---|---------------------------------------|
|        | First Name                     | Middle Name Last Name   |                                       |
| 40.    | Machinery, fixtures, e         | quipment, supplies you use in business, and tools of your trade   |                                       |
|        | <b>✓</b> No                    |   |                                       |
|        | Yes. Describe                  |   | 7                                     |
|        | _                              |   |                                       |
|        | -                              |   |                                       |
| 41.    | Inventory                      |   |                                       |
|        | <b>✓</b> No                    |   |                                       |
|        | Yes. Describe                  |   | 7                                     |
|        | Ш                              |   |                                       |
|        |                                |   | -                                     |
| 42.    | Interests in partnersh         | ips or joint ventures   |                                       |
|        | ✓ No                           |   |                                       |
|        | Yes. Give specific             | Name of entity: % of ownership:   |                                       |
|        | information about              |   |                                       |
|        | them                           | <del></del>   | <del>_</del>                          |
|        |                                |   |                                       |
|        |                                |   |                                       |
| 43.    | Customer lists, mailing        | lists, or other compilations  |                                       |
|        | —                              |   |                                       |
|        | ✓ No                           |   |                                       |
|        | Yes. Do your lists if          | nclude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?                                      |                                       |
|        | ☐ No                           |   |                                       |
|        | Yes. Desc                      | ribe  |                                       |
|        | ☐ ····                         |   | ·                                     |
| 44.    | Any business-related           | property you did not already list   |                                       |
|        | <b>✓</b> No                    |   |                                       |
|        |                                |   |                                       |
|        | Yes. Give specific information |   |                                       |
|        | inomation                      |   |                                       |
|        |                                |   | <del></del>                           |
|        |                                |   |                                       |
|        |                                |   |                                       |
|        |                                |   | <del></del>                           |
|        |                                |   |                                       |
|        |                                |   |                                       |
| 45. A  | dd the dollar value of a       | all of your entries from Part 5, including any entries for pages you have attached                                    |                                       |
| for Pa | art 5. Write that numbe        | er here   |                                       |
|        | Dogoribo Any E                 | orm and Commercial Fishing Polated Bronorty Voy Own or Hoyo on Interest In  |                                       |
| Part   | If you own or have an          | arm- and Commercial Fishing-Related Property You Own or Have an Interest In. interest in farmland, list it in Part 1. |                                       |
|        |                                |   |                                       |
| 46.    | Do you own or have a           | ny legal or equitable interest in any farm- or commercial fishing-related property?                                   |                                       |
|        | No. Go to Part 7.              |   | Current value of the portion you own? |
|        | Yes. Go to line 47.            |   | Do not deduct secured claims          |
|        | _                              |   | or exemptions                         |
| 47.    | Farm animals                   |   |                                       |
|        | Examples: Livestock, po        | oultry, farm-raised fish  |                                       |
|        | <b>✓</b> No                    |   |                                       |
|        | Yes. Describe                  |   |                                       |
|        |                                |   |                                       |
|        |                                |   |                                       |

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| Deb          | tor 1 Sarai   | Marks                    | Case number (if known)         |                  |
|--------------|---|--------------------------|--------------------------------|------------------|
|              | First Name Middle Name  | Last Name                |                                |                  |
| 48.          | Crops-either growing or harvested   |                          |                                |                  |
|              | <b>✓</b> No   |                          |                                |                  |
|              | Yes. Describe   |                          |                                |                  |
|              |   |                          |                                |                  |
|              |   |                          |                                |                  |
| 49.          | Farm and fishing equipment, implements, machinery, fixt   | ures, and tools of trade | •                              |                  |
|              | <b>✓</b> No   |                          |                                |                  |
|              | Yes. Describe   |                          |                                |                  |
|              | Tool Booking  |                          |                                |                  |
|              |   |                          |                                |                  |
| 50.          | Farm and fishing supplies, chemicals, and feed  |                          |                                |                  |
|              | No No   |                          |                                |                  |
|              | Yes. Describe   |                          |                                |                  |
|              | Tool Booking  |                          |                                |                  |
|              |   |                          |                                |                  |
| 51.          | Any farm- and commercial fishing-related property you di  | d not already list       |                                |                  |
|              | <b>☑</b> No   |                          |                                |                  |
|              | Yes. Describe   |                          |                                |                  |
|              | Tool Booking  |                          |                                |                  |
|              |   |                          |                                |                  |
| EO A         | dd the dellew velve of all of very emtrice from Deut C includ   | inn one ontrino for non  | as you have attached           |                  |
|              | dd the dollar value of all of your entries from Part 6, includ<br>art 6. Write that number here   |                          | es you have attached           |                  |
| <b>•</b>     |   |                          | L                              |                  |
|              |   |                          |                                |                  |
|              |   |                          |                                |                  |
| Part         | 7: Describe All Property You Own or Have an Inte  | rest in That You Did     | l Not List Above               |                  |
| 53.          |   |                          |                                |                  |
| 00.          | Examples: Season tickets, country club membership   | y                        |                                |                  |
|              | ✓ No  |                          |                                |                  |
|              | Yes. Give specific  |                          |                                |                  |
|              | information   |                          |                                |                  |
|              |   |                          |                                |                  |
|              |   |                          |                                |                  |
|              |   |                          |                                |                  |
| 54. A        | dd the dollar value of all of your entries from Part 7. Write   | that number here         |                                | <b>&gt;</b>      |
|              |   |                          |                                |                  |
|              |   |                          |                                |                  |
|              |   |                          |                                |                  |
|              |   |                          |                                |                  |
| Part         | 8: List the Totals of Each Part of this Form  |                          |                                |                  |
| ran          | 6. List the Totals of Laciffact of this Form  |                          |                                |                  |
| 55.          | Part 1: Total real estate, line 2   |                          | <b>&gt;</b>                    |                  |
|              | ,   |                          |                                |                  |
| 56.          | part 2 total vehicles, line 5   | \$2825.00                |                                |                  |
| 67 F         | Ocat 2. Total marroanal and harrochald itama line 45  | φ2023.00                 | <del></del>                    |                  |
| 57.F         | Part 3: Total personal and household items, line 15   | \$2300.00                |                                |                  |
| 58. <b>F</b> | Part 4: Total financial assets, line 36   | \$3490.00                |                                |                  |
| 59.          | Part 5: Total business-related property, line 45  |                          |                                |                  |
| 60           | Part 6: Total farm- and fishing-related property, line 52   |                          | <del>_</del>                   |                  |
|              |   |                          | <u> </u>                       |                  |
| 61.          | Part 7: Total other property not listed, line 54  |                          | <u> </u>                       |                  |
| 62.          | Total personal property. Add lines 56 through 61  | \$8615.00                |                                | + \$8615.00      |
|              |   |                          | Copy personal property total ► |                  |
|              |   |                          |                                | <b>#0015.00</b>  |
| 63 <b>1</b>  | otal of all property on Schedule A/B. Add line 55 + line 62   |                          |                                | <u>\$8615.00</u> |
| _ UU.        | The office of the order of the |                          |                                | i I              |

|  | Case 18-2606   | 8 Doc 1 F  | iled 09/17/18<br>Document  | Entered 0<br>Page 20 of                                   | 9/17/18 11:32:<br>81   | 48 Desc  | Main  |
|--|--|--|--|---|--|--|---|
| Fill in this infor   | mation to identify your ca   | se:  |  |   |  |  |   |
| Debtor 1   | Sarai  |  | Marks  |   |  |  |   |
| Debtor 2   | First Name   | Middle Name  |  |   |  |  |   |
| (Spouse, if filing)  | First Name   | Middle Name  | e Last Nar   | ne  |  |  |   |
| United States E  | Bankruptcy Court for the:  | Northern   | District of Illin  |   |  |  |   |
| Case number  |  |  | (Sta   | ite)  |  |  |   |
| Official   | Form 106C  |  |  |   | _  |  | Check if this is an amended filing                        |
| Schedul  | e C: The Prope   | erty You Cla   | aim as Exen  | npt   |  |  | 04/16   |
| information. Uas exempt. If                                      | te and accurate as poss<br>Jsing the property you<br>more space is needed,<br>ges, write your name ar                                    | listed on <i>Schedu</i><br>fill out and attach   | <i>le A/B: Property</i> (C<br>to this page as ma                               | fficial Form 106  | SA/B) as your source   | e, list the prope                                    | erty that you claim                                       |
| state a speci<br>the amount of<br>tax-exempt r<br>under a law to | n of property you clair fic dollar amount as e of any applicable statu etirement funds—may that limits the exemption would be limited to | xempt. Alternative tory limit. Some of the unlimited in the ton to a particular to the term of the ter | ely, you may claii<br>exemptions—suc<br>dollar amount. Ho<br>r dollar amount a | n the full fair m<br>h as those for h<br>owever, if you c | narket value of the<br>nealth aids, rights to<br>laim an exemption | property being<br>to receive cert<br>n of 100% of fa | g exempted up to<br>ain benefits, and<br>air market value |

Identify the Property You Claim as Exempt

| identity the Property You Clair   | ii as Exempt   |   |   |
|---|--|---|---|
| Which set of exemptions are you claim You are claiming state and federal You are claiming federal exemption For any property you list on Schedule A | nonbankruptcy exemp  | otions. 11 U.S.C. § 522(b)(3)   |   |
| Brief description of the property and line on Schedule A/B that lists this property   | Current value of the portion you own  Copy the value from Schedule A/B | Amount of the exemption you claim  Check only one box for each exemption.                           | Specific laws that allow exemption              |
| Brief description: Used Clothing Line from Schedule A/B: 11   | \$900.00   | \$900.00  100% of fair market value, up to any applicable statutory limit                           | 735 ILCS 5/12-1001(a)                           |
| Brief description:  GMC Envoy SLE 4WD, 2005, 2005 GMC Envoy SLE 4WD  Line from Schedule A/B:  03  | \$2,825.00   | \$2,400.00; \$425.00  100% of fair market value, up to any applicable statutory limit               | 735 ILCS 5/12-1001(c); 735 ILCS<br>5/12-1001(b) |
| ✓ No  | ery 3 years after that for   | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? |   |

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Debtor 1 Sarai Marks Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$1,000.00 description:  $\checkmark$ \$1,000.00 **Used Furniture** 100% of fair market value, up to any I ine from applicable statutory limit Schedule A/B: 06 Brief 735 ILCS 5/12-1001(b) \$400.00 description: **✓** \$400.00 Used Electronics - 1 TV, 100% of fair market value, up to any 1 Cell Phone applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) \$890.00 description:  $\overline{}$ \$890.00 Other financial account, 100% of fair market value, up to any PLS - Prepaid Debit applicable statutory limit Line from Schedule A/B: Brief 735 ILCS 5/12-1006 \$2.300.00 description: **V** \$2,300.00 401(k) or similar plan, w/ 100% of fair market value, up to any <u>emp</u>loyer applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$300.00 description: \$300.00 Security deposit on 100% of fair market value, up to any rental unit, w/ landlord applicable statutory limit

\$0

100% of fair market value, up to any

100% of fair market value, up to any

applicable statutory limit

applicable statutory limit

Line from Schedule A/B:

description:

Line from

Schedule A/B:

description:

Line from Schedule A/B:

employer

Term Life through

Brief

Brief

22

31

33

**Potential Workers Comp** 

- No Attorney retained

\$0.00

\$0.00

735 ILCS 5/12-1001(f)

820 ILCS 305/21

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|                       |                                |                                 | ĕ   |         |   |   |                                       |
|-----------------------|--------------------------------|---------------------------------|---|---------|---|---|---------------------------------------|
| Fill in th            | is information to identify you | r case:                         |   |         |   |   |                                       |
| Debtor <sup>-</sup>   | 1 Sarai                        |                                 | Marks   |         |   |   |                                       |
|                       | First Name                     | Middle Name                     | Last Name   | ,       |   |   |                                       |
| Debtor 2              | 2                              |                                 |   |         |   |   |                                       |
| (Spouse, i            | filing) First Name             | Middle Name                     | Last Name   | ,       |   |   |                                       |
| United S              | States Bankruptcy Court for th | e: Northern                     | District of Illinois  |         |   |   |                                       |
| _                     |                                |                                 | (State)   |         |   |   |                                       |
| Case nu<br>(If known) | ımber                          |                                 |   |         |   |   |                                       |
| , ,                   |                                |                                 |   |         |   | _   | Chook if this is on                   |
| Offic                 | cial Form 106D                 | )                               |   |         |   | L   | Check if this is an<br>amended filing |
| Sch                   | edule D: Cred                  | litors Who Ha                   | ve Claims Se  | cure    | d by Prop   | erty  | 12/15                                 |
| more sp               |                                |                                 | le are filing together, both a<br>mber the entries, and attacl  |         | •   |   |                                       |
| 1. <b>D</b> o         | any creditors have claim       | s secured by your prope         | rty?  |         |   |   |                                       |
| <b>✓</b>              | No. Check this box and s       | ubmit this form to the court    | with your other schedules. Y  | ou have | nothing else to repo  | rt on this form.                                      |                                       |
|                       | Yes. Fill in all of the inform | ation below.                    |   |         |   |   |                                       |
| Part 1:               | List All Secured Claim         | S                               |   |         |   |   |                                       |
| for                   |                                | creditor has a particular claim | red claim, list the creditor sepa<br>, list the other creditors in Part<br>ng to the creditor's name. | 2. As   | Column A  Amount of claim  Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any     |

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| HIII I                | in this infor  | mation to identify your c   | ase:   |  |  |   |   |   |
|-----------------------|--|---|--|--|--|---|---|---|
| Deb                   | otor 1   | Sarai   |  | Marks  |  |   |   |   |
|                       |  | First Name  | Middle Name  | Last Name  |  |   |   |   |
|                       | otor 2   |   |  |  |  |   |   |   |
| (Spo                  | use, if filing)  | First Name  | Middle Name  | Last Name  |  |   |   |   |
| Unit                  | ted States E   | Bankruptcy Court for the:   | Northern   | District of Illinois   |  |   |   |   |
| 0                     |  |   |  | (State)  |  |   |   |   |
| (If knd               | e number<br>own)   |   |  |  |  |   |   |   |
| Off                   | ficial F   | orm 106E/F  |  |  |  | Ch  | eck if this is ar   | n amended filing                                  |
|                       |  |   |  |  |  |   |   |   |
| Sc                    | chedu  | ule E/F: Cre  | editors Who  | Have Unse  | cured Claims   |   |   | 12/15   |
| othe<br>Form<br>clain | r party to a<br>n 106A/B) a<br>ns that are<br>entries in t<br>vn). | any executory contract<br>and on Schedule G: Exe<br>e listed in Schedule D: C<br>he boxes on the left. At | s or unexpired leases that<br>ecutory Contracts and Und<br>Creditors Who Hold Claims | t could result in a clain<br>expired Leases (Officia<br>s Secured by Property.         | ms and Part 2 for creditors wit<br>1. Also list executory contracts<br>Form 106G). Do not include a<br>If more space is needed, copy<br>top of any additional pages, v | on <i>Sched</i><br>ny credito<br>the Part y | <i>lule A/B: Prop</i><br>ors with partia<br>ou need, fill i | perty (Official<br>ally secured<br>it out, number |
| 1.                    | Do any c   | reditors have priority ur   | nsecured claims against y  | ou?  |  |   |   |   |
|                       | No.  | Go to Part 2.   | ,  |  |  |   |   |   |
|                       | Yes.   |   |  |  |  |   |   |   |
| 2.                    | listed, idea<br>As much<br>Continuat                               | ntify what type of claim it<br>as possible, list the claims<br>ion Page of Part 1. If mor                 | is. If a claim has both priori   | ty and nonpriority amour<br>ding to the creditor's nar<br>particular claim, list the c |  | both priorit                                | ty and nonpric  | ority amounts.                                    |
|                       |  |   |  |  |  | Total                                       | Priority  | Nonpriority                                       |

claim

amount

amount

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Debtor 1 Sarai Marks Case number (if known) First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **V** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 City of Chicago - Parking and red Light Tickets \$12,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 121 N. LaSalle Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60602 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify \_ Tickets Is the claim subject to offset? No Yes CREDMGMTCNTL \$768.00 Last 4 digits of account number 8613 Nonpriority Creditor's Name When was the debt incurred? 9/2016 P.O. BOX 1654 Number Street As of the date you file, the claim is: Check all that apply. Contingent **GREEN BAY** 54301 Unliquidated City Zip Code State Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: 10 JUST **V** No Other. Specify **ENERGY** Yes EDC/PANGEA REAL ESTATE 4.3 \$805.00 Last 4 digits of account number 8702 Nonpriority Creditor's Name When was the debt incurred? 11/2017 PO Box 809009 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60680 Illinois Chicago ✓ Disputed City Zip Code State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt 001 UnknownLoanType Other. Specify Is the claim subject to offset? **✓** No

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| Debtor <sup>-</sup> | Sarai<br>First Name                       |                                   | Middle Name  | Marks<br>Last Name   | Case number (if known)   |
|---------------------|---|-----------------------------------|--|--|--|
| Part 3:             | List Others to E                          | e Notified A                      | About a Debt That You                                | u Already Listed   |  |
| col<br>col<br>cre   | lection agency is t<br>lection agency her | rying to colle<br>e. Similarly, i | ct from you for a debt yo<br>f you have more than on | ou owe to someone else, list<br>the creditor for any of the de | that you already listed in Parts 1 or 2. For example, if a st the original creditor in Parts 1 or 2, then list the bts that you listed in Parts 1 or 2, list the additional rts 1 or 2, do not fill out or submit this page. |
| Nar                 |   |                                   |  | On which entry in Part 1                                       | or Part 2 did you list the original creditor?  |
|                     | 1 W. Jackson # 600<br>mber Street         |                                   |  | Line 4.1 of <i>(Ch one):</i>                                   | Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  |
| <u>Ch</u><br>Cit    | icago<br>y                                | Illinois<br>State                 | 60604<br>Zip Code                                    | Last 4 digits of account                                       | number   |

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 Debtor 1
 Sarai
 Marks
 Case number (if known)

 First Name
 Middle Name
 Last Name

| Part 4: Add th              | ne Amounts for Each Type of Unsecured Claim  |       |                                  |
|-----------------------------|--|-------|----------------------------------|
|                             | mounts of certain types of unsecured claims. This information is<br>nounts for each type of unsecured claim. | for s | statistical reporting purposes o |
|                             |  |       | Total claims                     |
| Total claims<br>from Part 1 | 6a. Domestic support obligations.  | 6a.   | \$0.00                           |
| nom Fait i                  | 6b. Taxes and certain other debts you owe the government   | 6b.   | \$0.00                           |
|                             | 6c. Claims for death or personal injury while you were intoxicated   | 6c.   | \$0.00                           |
|                             | 6d. Other. Add all other priority unsecured claims. Write that   | 6d.   | \$0.00                           |
|                             | amount here.   |       | \$0.00                           |
|                             | 6e. Total. Add lines 6a through 6d.  | 6e.   |                                  |
|                             |  |       | Total claims                     |
| Total claims from Part 2    | 6f. Student loans  | 6f.   | \$0.00                           |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | 6g.   | \$0.00                           |
|                             | 6h. Debts to pension or profit-sharing plans, and other similar  | 6h.   | \$0.00                           |
|                             | debts  |       | \$13,573.00                      |
|                             | <ol> <li>Other. Add all other nonpriority unsecured claims. Write<br/>that amount here.</li> </ol>           | 6i.   |                                  |
|                             | 6j. Total. Add lines 6f through 6i.  | 6j.   | \$13,573.00                      |

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| Fill in this infor     | mation to identify your ca | ase:        |                      |  |
|------------------------|----------------------------|-------------|----------------------|--|
| Debtor 1               | Sarai                      |             | Marks                |  |
|                        | First Name                 | Middle Name | Last Name            |  |
| Debtor 2               |                            |             |                      |  |
| (Spouse, if filing)    | First Name                 | Middle Name | Last Name            |  |
| United States E        | Bankruptcy Court for the:  | Northern    | District of Illinois |  |
|                        |                            | _           | (State)              |  |
| Case number (If known) |                            |             |                      |  |

#### Official Form 106G

#### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or com                    | pany with whom you have | the contract or lease | State what the contract or lease is for                                       |
|-----|----------------------------------|-------------------------|-----------------------|---|
| 2.1 | Pangea<br>Name<br>2231 E 71st St |                         |                       | Residential Lease,<br>Debtor is Lessee,<br>Month to Month - Residential Lease |
|     | Number                           | Street                  |                       |   |
|     | Chicago                          | Illinois                | 60649                 |   |
|     | City                             | State                   | Zip Code              |   |

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|   |  | DC  | cument rage   | 20 01 01  |
|---|--|---|---|---|
| Fill in this infor                        | mation to identify your  | case:   |   |   |
| Debtor 1                                  | Sarai  |   | Marks   |   |
|   | First Name   | Middle Name   | Last Name   |   |
| Debtor 2<br>(Spouse, if filing)           | First Name   | Middle Name   | Last Name   | <del></del>   |
| United States E                           | Bankruptcy Court for the   | : Northern  | District of Illinois                                      |   |
|   |  |   | (State)   |   |
| Case number (If known)                    |  |   |   | <del></del>   |
|   |  |   |   | Check if this is an   |
| Official                                  | Form 106U  |   |   | amended filing  |
| Official                                  | Form 106H  |   |   |   |
| Schedul                                   | e H: Your Co   | debtors   |   | 12/15   |
| No Yes  2. Within the Idaho, Lot No. Yes. | e last 8 years, have yo<br>uisiana, Nevada, New M<br>Go to line 3. | you are filing a joint case, do  u lived in a community pro exico, Puerto Rico, Texas, W  ner spouse, or legal equiva | perty state or territory? (<br>ashington, and Wisconsin.) | Community property states and territories include Arizona, California,  |
|   | Yes. In which commur   | nity state or territory did you   | u live?   | _ Fill in the name and current address of that person.  |
|   | Name of your spouse  | former spouse, or legal equ   | ivalent   | <u> </u>  |
|   | Number Street  |   |   | <del></del>   |
|   | City   | State   | Zip Code  |   |
| again as a                                | a codebtor only if that  | person is a guarantor or o  | osigner. Make sure you h                                  | your spouse is filing with you. List the person shown in line 2 ave listed the creditor on Schedule D (Official Form 106D), dule D, Schedule E/F, or Schedule G to fill out Column 2. |

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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|             |  | _                                       | _                 | 3 -            |                       |                                   |                    |
|-------------|--|---|-------------------|----------------|-----------------------|-----------------------------------|--------------------|
| Fill in t   | his information to identify  | your case:                              |                   |                |                       |                                   |                    |
| Debtor      | 1 Sarai  |   | Marks             |                |                       |                                   |                    |
|             | First Name   | Middle Name                             | Last Na           | ame            | Che                   | eck if this is:                   |                    |
| Debtor      |  | Ministra Nama                           | 1+ NI-            |                | _                     | An amended filing                 |                    |
| (Spouse,    | if filing) First Name  | Middle Name                             | Last Na           | -              |                       | A supplement showing post-        | notition chapter 1 |
| United the: | States Bankruptcy Court for  | Northern                                | District of Illin |                |                       | expenses as of the following      |                    |
| Case no     | umber  |   | (3)               | ate)           |                       |                                   |                    |
| (If known   | n)   |   |                   |                |                       | MM / DD / YYYY                    |                    |
| Offic       | cial Form 106I   |   |                   |                |                       |                                   |                    |
| Sche        | edule I: Your In   | come                                    |                   |                |                       |                                   | 12/15              |
| spouse      | ation about your spouse. I . If more space is needed r (if known). Answer ever  Describe Employmen | l, attach a separate she<br>y question. |                   |                |                       |                                   |                    |
|             | in your employment   |   | Debtor 1          |                |                       | Debtor 2                          |                    |
| info        | ormation.  | Employment status                       | - Employ          | ınd            |                       |                                   |                    |
| _           | ou have more than one job,<br>ach a separate page with   | p.cyc.u.c.u.c                           | ✓ Employ          | yea<br>iployed |                       | Employed  Not Employed            |                    |
| info        | ormation about additional  |   | _                 | .pioyou        |                       | Thet Employed                     |                    |
| em          | ployers.   | Occupation                              | Packer            |                |                       | _                                 |                    |
|             | lude part time, seasonal, or<br>f-employed work.   | Employer's name                         | West Libert       | y Foods, LL    | С                     |                                   |                    |
|             | cupation may include student   | Employer's address                      | 750 S Schr        |                |                       |                                   |                    |
|             | nomemaker, if it applies.  |   | Number Stre       | eet            |                       | Number Street                     |                    |
|             |  |   |                   |                |                       | _                                 |                    |
|             |  |   | Bolingbroo        | k Illinois     | 60440                 |                                   |                    |
|             |  |   | City              | State          | Zip Code              | City State                        | e Zip Code         |
|             |  | How long employed there?                | 11 months         | <u>:</u>       |                       |                                   |                    |
| Part 2      | 2: Give Details About N  | Nonthly Income                          |                   |                |                       |                                   |                    |
|             | nate monthly income as of  |   | n. If you have i  | nothing to re  | eport for any line, v | write \$0 in the space. Include   | e your non-filing  |
|             | e unless you are separated.<br>or your non-filing spouse have                                      | o more than one empleyer                | combine the       | nformation t   | for all amplements    | or that parson on the lines be    | olow If you soud   |
|             | or your non-niing spouse nav<br>space, attach a separate she                                       |   | combine the i     | niormation i   | or all employers ic   | or that person on the lines be    | now. If you need   |
|             |  |   |                   | F              | or Debtor 1           | For Debtor 2 or non-filing spouse |                    |
| d           | ist monthly gross wages, sala<br>leductions.) If not paid monthly<br>be.                           |   |                   | 2.             | \$2,840.18            | mon-ning spouse                   |                    |
| 3. <b>E</b> | stimate and list monthly over  | rtime pay.                              |                   | 3.             | + \$0.00              |                                   |                    |
| 4. <b>C</b> | Calculate gross income. Add li   | ine 2 + line 3.                         |                   | 4.             | \$2,840.18            |                                   |                    |
|             |  |   |                   | 1              |                       |                                   |                    |

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| Dec           | otor 1 <u>Sarai</u><br>First Name              |   | Marks<br>Last Name |          | Case numbe                              | r <i>(if</i>                      |       |                         |
|---------------|--|---|--------------------|----------|---|-----------------------------------|-------|-------------------------|
|               | riist Name                                     | Middle Name I   | Last Name          |          | For Debtor 1                            | For Debtor 2 or non-filing spouse |       |                         |
| С             | opy line 4 here                                |   | <b>→</b> 4.        | _        | \$2,840.18                              |                                   | i     |                         |
|               | ist all payroll deduct                         |   |                    | •        | _                                       |                                   |       |                         |
|               |  | nd Social Security deductions   | 5a                 | l.       | \$507.39                                |                                   |       |                         |
| 5             | b. <b>Mandatory contri</b>                     | butions for retirement plans  | 5b                 | ).<br>). | \$0.00                                  |                                   |       |                         |
|               | -  | utions for retirement plans   | 5c                 | ·<br>:.  | \$0.00                                  |                                   |       |                         |
|               | _  | ents of retirement fund loans   | 5d                 | i.       | \$0.00                                  |                                   |       |                         |
| 5             | ie. Insurance                                  |   | 5e                 | ).       | \$14.30                                 |                                   |       |                         |
| 5             | f. Domestic support                            | obligations   | 5f.                |          | \$0.00                                  |                                   |       |                         |
|               | ig. Union dues                                 | 3   | 5g                 | •        | \$0.00                                  |                                   |       |                         |
|               |  | s. Specify:   | _                  | 1. +     | \$0.00 +                                |                                   |       |                         |
|               | dd the payroll deduc                           | ctions. Add lines 5a + 5b + 5c + 5d + 5e +5   | <del></del> '      |          | \$521.69                                |                                   |       |                         |
| 7. <b>C</b>   | alculate total month                           | nly take-home pay. Subtract line 6 from line  | e 4. 7.            |          | \$2,318.49                              |                                   |       |                         |
| 8. <b>L</b> i | ist all other income                           | regularly received:   |                    |          |   |                                   |       |                         |
| 8             | business, professi                             |   |                    |          |   |                                   |       |                         |
|               |  | for each property and business showing<br>inary and necessary business expenses, and  |                    |          |   |                                   |       |                         |
|               | the total monthly n                            |   | 8a                 | ١        | \$0.00                                  |                                   |       |                         |
| 8             | b. Interest and divid                          | lends   | 8b                 | ).       | \$0.00                                  |                                   |       |                         |
| 8             | dependent regula                               | -   |                    |          |   |                                   |       |                         |
|               | divorce settlement,                            | pousal support, child support, maintenance, and property settlement.  | 8c                 |          | \$0.00                                  |                                   |       |                         |
| 8             | d. Unemployment c                              | ompensation   | 8d                 | l        | \$0.00                                  |                                   |       |                         |
| 8             | e. Social Security                             |   | 8e                 | ).       | \$0.00                                  |                                   |       |                         |
| 8             | Include cash assista cash assistance tha       | t assistance that you regularly receive<br>ance and the value (if known) of any non-<br>it you receive, such as food stamps (benefits<br>ental Nutrition Assistance Program) or | s<br>8f.           |          | \$637.00                                |                                   |       |                         |
| 8             | g. Pension or retire                           |   | 8g                 |          | \$0.00                                  |                                   |       |                         |
|               | 9  | come. Specify: Anticipated Tax Refund   | ŭ                  | 1. +     | \$295.00 +                              |                                   |       |                         |
|               |  | Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +   |                    |          | \$932.00                                |                                   |       |                         |
|               | •  | come. Add line 7 + line 9.<br>10 for Debtor 1 and Debtor 2 or non-filing sp   | 10<br>pouse        | ). [     | \$3,250.49                              |                                   | =     | \$3,250.49              |
| lı<br>fı      | nclude contributions f<br>riends or relatives. | ar contributions to the expenses that you rom an unmarried partner, members of your ounts already included in lines 2-10 or amou  | household,         | your d   | ependents, your roomr                   |                                   |       |                         |
|               | Specify:                                       | •   |                    |          | 1 7 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 |                                   | 11. + | \$0.00                  |
| _             |  |   |                    |          |   |                                   |       |                         |
|               |  | he last column of line 10 to the amount in the Summary of Schedules and Statistical Sur   |                    |          |   |                                   | 12.   | \$3,250.49              |
|               |  |   |                    |          |   |                                   |       | Combined monthly income |
| 13. I         | Do you expect an ind                           | crease or decrease within the year after  | you file this      | form?    |   |                                   |       |                         |
|               | ✓ No.  |   |                    |          |   |                                   |       |                         |
|               | Yes. Explain:                                  |   |                    |          |   |                                   |       |                         |
|               |  |   |                    |          |   |                                   |       |                         |

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|                                 |  |  | 1 1 19 1  |                    |  |              |
|---------------------------------|--|--|---|--------------------|--|--------------|
| Fill in this infor              | mation to identify yo                        | ur case:   |   |                    |  |              |
| Debtor 1                        | Sarai  |  | Marks   |                    |  |              |
| Dalatan                         | First Name                                   | Middle Name  | Last Name   | Check if this is:  |  |              |
| Debtor 2<br>(Spouse, if filing) | First Name                                   | Middle Name  | Last Name   | An amended fili    | ng                                       |              |
| United States E                 | Sankruptcy Court for t                       | he: Northern [   | District of Illinois (State)  |                    | howing post-petition the following date: | n chapter 13 |
| Case number                     |  |  | (**************************************                                   |                    |  |              |
| (II KHOWII)                     |  |  |   | MM / DD / YYY      | 7  |              |
| Official                        | Form 106                                     | J  |   |                    |  |              |
| Schedul                         | e J: Your Ex                                 | -<br>cpenses   |   |                    |  | 12/15        |
| information. If (if known). Ans | more space is need<br>wer every question.    | ed, attach another sheet to this                               | re filing together, both are equally<br>form. On the top of any additiona | •                  |  | nber         |
| Part 1: Des                     | cribe Your House                             | hold   |   |                    |  |              |
| 1. Is this a joi                | nt case?                                     |  |   |                    |  |              |
| ✓ No. Go                        | to line 2                                    |  |   |                    |  |              |
| Yes. Do                         | oes Debtor 2 live in                         | a separate household?  |   |                    |  |              |
| _ г                             | No   |  |   |                    |  |              |
|                                 | ┛<br>┓ Yes. Debtor 2 mus                     | st file Official Forms 106J-2. <i>Exper</i>                    | nses for Separate Household of Debt                                       | or 2.              |  |              |
| 2. Do you how                   | e dependents?                                | · · · · · · · · · · · · · · · · · · ·                          | 1000 for Copulatio Fraucoriora CF 2001.                                   |                    |  |              |
|                                 |  | No   |   |                    |  |              |
| Do not list D Debtor 2.         | ebtor 1 and                                  | Yes. Fill out this information for each dependent              | Dependent's relationship to<br>Debtor 1 or Debtor 2                       | Dependent's<br>age | Does dependen<br>with you?               | t live       |
|                                 |  |  | Child   | 9 years            | No.                                      |              |
|                                 |  |  |   |                    | ✓ Yes.                                   |              |
|                                 |  |  | Child   | 8 years            | No.                                      |              |
|                                 |  |  |   |                    | Yes.                                     |              |
|                                 |  |  | Child   | 2 years            | No.                                      |              |
|                                 |  |  |   |                    | ✓ Yes.                                   |              |
|                                 | enses include<br>f people other              | No   |   |                    |  |              |
| yourself and                    | _  | Yes  |   |                    |  |              |
| Part 2: Estin                   | nate Your Ongoir                             | ng Monthly Expenses  |   |                    |  |              |
|                                 | of a date after the ba                       |  | rou are using this form as a supple<br>plemental Schedule J, check the    |                    |  | e            |
|                                 | •  | on-cash government assistance ed it on Schedule I: Your Income | •   |                    | Your                                     | expenses     |
|                                 | or home ownership<br>or the ground or lot. 4 |  | clude first mortgage payments and   |                    | 4.                                       | \$805.00     |
| If not incl                     | uded in line 4:                              |  |   |                    |  |              |
| 4a. Real es                     | state taxes                                  |  |   |                    | 4a                                       | \$0.00       |
| 4b. Proper                      | ty, homeowner's, or                          | renter's insurance   |   |                    | 4b                                       | \$0.00       |
| 4c. Home                        | maintenance, repair, a                       | and upkeep expenses  |   |                    | 4c.                                      | \$0.00       |

\$0.00

4d.

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Sarai
 Marks
 Case number (if known)

 Last Name
 Last Name

| First Name Middle Name Last Name   |             |               |
|--|-------------|---------------|
|  |             | Your expenses |
| 5. Additional mortgage payments for your residence, such as home equity loans                            | 5.          | \$0.00        |
| 6. Utilities:  |             |               |
| 6a. Electricity, heat, natural gas   | 6a.         | \$200.00      |
| 6b. Water, sewer, garbage collection   | 6b.         | \$0.00        |
| 6c. Telephone, cell phone, Internet, satellite, and cable services                                       | 6c.         | \$80.00       |
| 6d. Other. Specify:  | 6d          | \$0.00        |
| 7. Food and housekeeping supplies  | 7.          | \$1,000.00    |
| 8. Childcare and children's education costs  | 8.          | \$0.00        |
| 9. Clothing, laundry, and dry cleaning   | 9.          | \$300.00      |
| 10. Personal care products and services  | 10.         | \$200.00      |
| 11. Medical and dental expenses  | 11.         | \$100.00      |
| 12. <b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments     | 12.         | \$300.00      |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books                                   | 13.         | \$0.00        |
| 14. Charitable contributions and religious donations   | 14.         | \$0.00        |
| 15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.      |             |               |
| 15a. Life insurance  | 15a         | \$0.00        |
| 15b. Health insurance  | 15b         | \$0.00        |
| 15c. Vehicle insurance   | 15c         | \$75.00       |
| 15d. Other insurance. Specify:   | <b>1</b> 5d | \$0.00        |
| 16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.              |             |               |
| Specify:   | 16          | \$0.00        |
| 17. Installment or lease payments:   |             |               |
| 17a. Car payments for Vehicle 1  | 17a         | \$0.00        |
| 17b. Car payments for Vehicle 2  | 17b         | \$0.00        |
| 17c. Other. Specify:   | 17c         | \$0.00        |
| 17d. Other. Specify:   | 17d         | \$0.00        |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from          |             | \$0.00        |
| your pay on line 5, Schedule I, Your Income (Official Form 106I).  | 18.         |               |
| 19.Other payments you make to support others who do not live with you.  Specify:                         | 19.         | <b>\$0.00</b> |
| 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 19.         | \$0.00        |
| 20a. Mortgages on other property   | 20a         | \$0.00        |
| 20b. Real estate taxes.  | 20b         | \$0.00        |
| 20c. Property, homeowner's, or renter's insurance  | 20c         | \$0.00        |
| 20d. Maintenance, repair, and upkeep expenses.   | 20d         | \$0.00        |
|  |             |               |

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| Debtor 1 Sarai |                          |                          | Marks  | Case number (if known) |     |            |
|----------------|--------------------------|--------------------------|--|------------------------|-----|------------|
| First N        | lame                     | Middle Name              | Last Name  |                        |     |            |
| 21.Other. Spe  | cify:                    |                          |  |                        | 21  | \$0.00     |
|                |                          |                          |  |                        |     |            |
|                | your monthly expense     | es.                      |  |                        |     | \$3,060.00 |
|                | es 4 through 21.         |                          |  |                        |     | \$0.00     |
|                | ` .                      | **                       | from Official Form 106J-2                                      |                        |     | \$3,060.00 |
| 22c. Add lin   | e 22a and 22b. The res   | sult is your monthly exp | enses.   |                        | 22. |            |
| 23. Calculate  | our monthly net inco     | me.                      |  |                        |     |            |
| 23a. Copy I    | ine 12 (your combined    | monthly income) from S   | Schedule I.  |                        | 23a | \$3,250.49 |
| 23b. Copy      | your monthly expenses    | from line 22 above.      |  |                        | 23b | \$3,060.00 |
|                |                          | ses from your monthly in | ncome.   |                        |     | \$190.49   |
| The re         | sult is your monthly net | t income.                |  |                        | 23c |            |
|                |                          |                          | oan within the year or do yo<br>nodification to the terms of y |                        |     |            |
|                |                          |                          |  |                        |     |            |

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| Fill in this infor        | mation to identify your c | ase:        |                              |  |
|---------------------------|---------------------------|-------------|------------------------------|--|
| Debtor 1                  | Sarai                     |             | Marks                        |  |
|                           | First Name                | Middle Name | Last Name                    |  |
| Debtor 2                  |                           |             |                              |  |
| (Spouse, if filing)       | First Name                | Middle Name | Last Name                    |  |
| United States E           | Bankruptcy Court for the: | Northern    | District of Illinois (State) |  |
| Case number<br>(If known) |                           |             | (Giaic)                      |  |

#### Official Form 106Dec

#### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below  |   |
|-----|--|---|
|     | Did you pay or agree to pay someone who is NOT an attorney to h                                    | nelp you fill out bankruptcy forms?   |
|     | <b>✓</b> No  |   |
|     | Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|     |  |   |
|     |  |   |
|     | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and   |
| ×   | /s/ Sarai Marks  | *   |
|     | Signature of Debtor 1  | Signature of Debtor 2   |
|     | Date 9/17/2018   | Date  |
|     | MM/DD/YYYY   | MM/DD/YYYY  |

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|                 |                            | mation to identify your o                                       | case:                |  |  |  |  |
|-----------------|----------------------------|---|----------------------|--|--|--|--|
| Debto           | or 1                       | Sarai   |                      | Marks  |  |  |  |
|                 |                            | First Name  | Middle N             | lame Last Nam  | е  |  |  |
| Debto<br>(Spous | or 2<br>se, if filing)     | First Name  | Middle N             | lame Last Nam  | <u>e</u>   |  |  |
| Unite           | d States E                 | Bankruptcy Court for the:                                       | Northern             | District of Illino   |  |  |  |
|                 | number                     |   |                      | (State   | e)<br>   |  |  |
| (If knov        | vn)                        |   |                      |  |  |  | Check if this is   |
| Off             | icial                      | Form 107  |                      |  |  |  | amended filing   |
| Sta             | teme                       | nt of Financia  | al Affairs fo        | or Individuals   | Filing for Ba  | nkruptcy   | 04/  |
| inforn          | nation. I                  |   | ed, attach a sepa    |  |  | equally responsible for s<br>additional pages, write |  |
| Part            | 1: Give                    | Details About Your  | Marital Status       | and Where You Lived  | Before   |  |  |
| 1.              | What is                    | your current marital st   | atus?                |  |  |  |  |
|                 | ☐ Mai                      | rried   |                      |  |  |  |  |
|                 | ✓ Not                      | married   |                      |  |  |  |  |
| 2.              | During t                   | the last 3 years, have ye                                       | ou lived anywhere    | other than where you liv   | ve now?  |  |  |
|                 | ☐ No<br>✓ Yes              | s. List all of the places y                                     | ou lived in the last | 3 years. Do not include v  | vhere you live now.  |  |  |
|                 | Deb                        | otor 1:   |                      | Dates Debtor 1 lived   | Debtor 2:  |  | Dates Debtor 2 lived                                     |
|                 | Deb                        | otor 1:   |                      |  | Debtor 2:  |  | there  |
|                 |                            |   |                      | Dates Debtor 1 lived   |  | or 1   |  |
|                 | 433                        | otor 1:  85 W Fullerton  mber Street                            |                      | Dates Debtor 1 lived   | Debtor 2:  | or 1   | there  |
|                 | 433                        | 85 W Fullerton  |                      | Dates Debtor 1 lived there   | Debtor 2:  Same as Debto                                       | or 1   | Same as Debtor 1   |
|                 | 433<br>Nun<br>———          | 85 W Fullerton The Street Cago Illinois                         | 60639                | Dates Debtor 1 lived there  From 05/2000   | Debtor 2:  Same as Debto  Number Street                        |  | Same as Debtor 1  From                                   |
|                 | 433<br>Nun                 | 85 W Fullerton The Street Cago Illinois                         | 60639<br>Zip Code    | Dates Debtor 1 lived there  From 05/2000   | Debtor 2:  Same as Debtor  Number Street                       | State Zip Code                                       | there  Same as Debtor 1  From To                         |
|                 | 433<br>Nun<br>———          | 85 W Fullerton The Street Cago Illinois                         |                      | Dates Debtor 1 lived there  From 05/2000   | Debtor 2:  Same as Debto  Number Street                        | State Zip Code                                       | Same as Debtor 1  From                                   |
|                 | 433<br>Nun<br>Chic<br>City | 85 W Fullerton The Street Cago Illinois                         |                      | Dates Debtor 1 lived there  From 05/2000   | Debtor 2:  Same as Debtor  Number Street                       | State Zip Code                                       | there  Same as Debtor 1  From To                         |
|                 | 433<br>Nun<br>Chic<br>City | 35 W Fullerton mber Street  cago Illinois Cate                  |                      | Dates Debtor 1 lived there           From         05/2000           To         05/2014 | Debtor 2:  Same as Debtor  Number Street  City  Same as Debtor | State Zip Code                                       | there  Same as Debtor 1  From To  Same as Debtor 1       |
|                 | 433<br>Nun<br>Chic<br>City | 25 W Fullerton The Street  Cago Illinois Cago State  The Street |                      | Dates Debtor 1 lived there           From         05/2000           To         05/2014 | Debtor 2:  Same as Debtor  Number Street  City Same as Debtor  | State Zip Code                                       | there  Same as Debtor 1  From To  Same as Debtor 1  From |

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| Complete the O  | dle Name Last I   | Name  |  |  |
|---|---|---|--|--|
| 2: Explain the Sources of Your II   | ncome   |   |  |  |
| Did you have any income from employs Fill in the total amount of income you reconctivities. If you are filing a joint case and No  Yes. Fill in the details.  | eived from all jobs and all bu  | usinesses, including part-time  |  | years?   |
|   | Debtor 1  |   | Debtor 2   |  |
|   | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions)   | Sources of income<br>Check all that apply.                                   | Gross income<br>(before deductions an<br>exclusions) |
| From January 1 of current year until the date you filed for bankruptcy:   | ✓ Wages, commissions, bonuses, tips  Operating a business   | \$18890.87  | Wages, commissions, bonuses, tips Operating a business                       |  |
| For last calendar year: (January 1 to December 31, 2017 )  YYYY   | Wages, commissions, bonuses, tips Operating a business  | \$7000.00   | Wages, commissions, bonuses, tips Operating a business                       |  |
| For the calendar year before that: (January 1 to December 31, 2016 )  YYYY  | Wages, commissions, bonuses, tips Operating a business  | \$7000.00   | Wages, commissions, bonuses, tips Operating a business                       |  |
|   |   |   |  |  |
| Did you receive any other income during notice income regardless of whether that bublic benefit payments; pensions; rental is illing a joint case and you have income that it each source and the gross income from No  Yes. Fill in the details. | income is taxable. Example income; interest; dividends; at you received together, list  | s of other income are alimony;<br>money collected from lawsuits<br>it only once under Debtor 1.   | ; royalties; and gambling and  |  |
| nclude income regardless of whether that public benefit payments; pensions; rental if illing a joint case and you have income that it each source and the gross income fro  | income is taxable. Example income; interest; dividends; at you received together, list  | s of other income are alimony;<br>money collected from lawsuits<br>it only once under Debtor 1.   | ; royalties; and gambling and  |  |
| nclude income regardless of whether that public benefit payments; pensions; rental if illing a joint case and you have income that it each source and the gross income fro  | income is taxable. Example income; interest; dividends; at you received together, list om each source separately.   | s of other income are alimony;<br>money collected from lawsuits<br>it only once under Debtor 1.   | ; royalties; and gambling and listed in line 4.                              | Gross income from each source                        |
| nclude income regardless of whether that public benefit payments; pensions; rental if illing a joint case and you have income that it each source and the gross income fro  | income is taxable. Example income; interest; dividends; at you received together, list om each source separately. In the source of income Describe below. | s of other income are alimony; money collected from lawsuits it only once under Debtor 1.  On not include income that you  Gross income from each source (before deductions                 | ; royalties; and gambling and listed in line 4.  Debtor 2  Sources of income | Gross income from each source (before deductions as  |
| nclude income regardless of whether that bublic benefit payments; pensions; rental if illing a joint case and you have income that it each source and the gross income from No  Yes. Fill in the details.  From January 1 of current year until   | Debtor 1  Sources of income Describe below.  Food/ Link  Food/ Link   | s of other income are alimony; money collected from lawsuits it only once under Debtor 1.  On not include income that you  Gross income from each source (before deductions and exclusions) | ; royalties; and gambling and listed in line 4.  Debtor 2  Sources of income | Gross income from each source (before deductions as  |

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Debtor 1 Sarai Marks Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors

Other

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| nsider?  | or 1                    | Sarai   |  | Ma                                       | rks  | Case number                                  | (if known)   |
|--|-------------------------|---|--|--|--|--|--|
| insider's Name Number Street    No   Yes. List all payments that benefited an insider.   Dates of payments or transfer any property on account of a debt that benefited an insider?   No   Yes. List all payments that benefited an insider.   Dates of payments on debts guaranteed or cosigned by an insider.   Dates of payments or debts guaranteed or cosigned by an insider.   Dates of payments or transfer any property on account of a debt that benefited an insider.   Dates of payments or transfer any property on account of a debt that benefited an insider.   Dates of payments by State   Zip Code   Dates of payments or transfer any property on account of a debt that benefited an insider?   No   Yes. List all payments that benefited an insider.   Dates of payment   Dates of payments or transfer any property on account of a debt that benefited an insider?   No   Yes. List all payments that benefited an insider.   Dates of payment   Dates o |                         | First Name  | Middle Name  | Las                                      | t Name                                       |  |  |
| Total amount pour still owe Reason for this payment    Dates of payment   Dates of payment   Dates of payment   Dates of payment   Dates of payment   Dates of payment   Dates of payment   Dates of payment   Dates of payment   Dates of payments or transfer any property on account of a debt that benefited an insider.    No   Yes. List all payments that benefited an insider.   Dates of payment   Dates of payment | nsio<br>orp<br>ger      | ders include your relatives;<br>porations of which you are<br>nt, including one for a bus | ; any general partners<br>e an officer, director, p<br>siness you operate as | ; relatives of any<br>person in control, | general partners; part<br>or owner of 20% or | tnerships of which y<br>more of their voting | ou are a general partner; g securities; and any managing |
| Insider's Name Number Street  City State Zip Code  Insider's Name Number Street  City State Zip Code  Vithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?  No Yes. List all payments that benefited an insider.  Dates of payment  Dates of payment  Dates of payment  Include creditor's name  Number Street  City State Zip Code  City State Zip Code  Insider's Name  Number Street  City State Zip Code  | <b>✓</b>                |   | n an insider   |  |  |  |  |
| Number Street  City State Zip Code  Vithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?  No Yes. List all payments that benefited an insider.  Dates of payment Dates o | _                       | 103. List all payments to   | o arr insider.   |  |  |  | Reason for this payment                                  |
| City State Zip Code    Insider's Name   Number Street  |                         | Insider's Name  |  |  |  |  |  |
| Insider's Name Number Street  City State Zip Code  Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an nisider?  City State Zip Code  No Yes. List all payments that benefited an insider.  Dates of payment paid  Total amount Amount you still owe Reason for this payment paid  Insider's Name  Number Street  City State Zip Code  Insider's Name  Number Street  |                         | Number Street   |  |  |  |  |  |
| Number Street  City State Zip Code  Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?  nclude payments on debts guaranteed or cosigned by an insider.  No Yes. List all payments that benefited an insider.  Dates of payment paid  Total amount you still owe  Insider's Name  Number Street  City State Zip Code  Number Street  Insider's Name  Number Street   |                         | City State  | Zip Code   |  |  |  |  |
| City State Zip Code  Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider.  No Yes. List all payments that benefited an insider.  Dates of payment paid Amount you still owe Include creditor's name  Insider's Name  Number Street  City State Zip Code  Insider's Name  Number Street  |                         | Insider's Name  |  |  |  |  |  |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?  No Yes. List all payments that benefited an insider.  Dates of payment paid Dates of payment Date |                         | Number Street   |  |  |  |  |  |
| Yes. List all payments that benefited an insider.    Dates of payment   Total amount paid   Amount you still owe   Reason for this payment   Include creditor's name   |                         | City State  | Zip Code   |  |  |  |  |
| Insider's Name Number Street  City State Zip Code  Insider's Name Number Street  | i <b>nsi</b> d<br>Inclu | der?<br>ude payments on debts gr<br>No  | uaranteed or cosigne   | d by an insider.  der.  Dates of         | Total amount                                 | Amount you                                   |  |
| Number Street  City State Zip Code  Insider's Name  Number Street  |                         |   |  | payment                                  | paid   | still owe                                    | Include creditor's name                                  |
| City State Zip Code  Insider's Name  Number Street   |                         | Insider's Name  |  |  |  |  |  |
| Insider's Name  Number Street  |                         | Number Street   | ,<br>  |  |  |  |  |
| Number Street  |                         | City State  | Zip Code   |  |  |  |  |
|  |                         | Insider's Name  |  |  |  |  |  |
| City State 7in Code  |                         | Number Street   |  |  |  |  |  |
|  |                         |   | 7'- 01-  |  |  |  |  |

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Debtor 1 Sarai Marks Case number (if known) First Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code

Property was attached, seized, or levied.

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| Debt | or 1     | Sarai   |        | Marks                     | Case number (if known          | )                        |                     |
|------|----------|---|--------|---------------------------|--------------------------------|--------------------------|---------------------|
|      |          | First Name Middle Name  |        | Last Name                 | <u></u>                        |                          |                     |
| 11.  |          | thin 90 days before you filed for bankruptcy,<br>counts or refuse to make a payment because     |        |                           | pank or financial institution, | set off any amou         | nts from your       |
|      | <b>✓</b> | No<br>Yes. Fill in the details.   |        |                           |                                |                          |                     |
|      |          | ı   |        | Describe the action th    | e creditor took                | Date action was taken    | Amount              |
|      |          | Creditor's Name   | _      |                           |                                |                          |                     |
|      |          | Number Street   | _      |                           |                                |                          |                     |
|      |          |   | _      | Last 4 digits of account  | number: XXXX-                  |                          |                     |
|      |          | City State Zip Code   | _      |                           |                                |                          |                     |
| 12.  |          | hin 1 year before you filed for bankruptcy, w<br>pointed receiver, a custodian, or another offi |        | of your property in the   | possession of an assignee f    | or the benefit of c      | creditors, a court- |
|      | <b>✓</b> | No  |        |                           |                                |                          |                     |
|      |          | Yes   |        |                           |                                |                          |                     |
| Part | 5:       | List Certain Gifts and Contributions  |        |                           |                                |                          |                     |
| 13.  | Wi       | ithin 2 years before you filed for bankruptcy,  | did yo | u give any gifts with a t | otal value of more than \$60   | 0 per person?            |                     |
|      | <b>✓</b> | No Yes. Fill in the details for each gift.  |        |                           |                                |                          |                     |
|      |          | Gifts with a total value of more than \$600 per person  |        | Describe the gifts        |                                | Dates you gave the gifts | Value               |
|      |          |   |        |                           |                                |                          |                     |
|      |          | Person to Whom You Gave the Gift  |        |                           |                                |                          |                     |
|      |          | Number Street   |        |                           |                                |                          |                     |
|      |          | City State Zip Code   |        |                           |                                |                          |                     |
|      |          | Person's relationship to you  |        |                           |                                |                          |                     |
|      |          | Person to Whom You Gave the Gift  |        |                           |                                |                          |                     |
|      |          | Number Street   |        |                           |                                |                          |                     |
|      |          | City State Zip Code Person's relationship to you  |        |                           |                                |                          |                     |

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| DIOI I     | Sarai   | Marks                                    | Case number (if known)                     |                       |
|------------|---|--|--|-----------------------|
|            | First Name Middle Name  | Last Name                                |  |                       |
| \A/:-      | thin 2 years before you filed for bankruptou  | did you give any gifts or contribution   | with a total value of more than \$60       | ) to any obarity?     |
| Wit        | thin 2 years before you filed for bankruptcy  | , aid you give any giπs or contribution  | s with a total value of more than \$60     | to any charity?       |
| ✓          | No  |  |  |                       |
|            | Yes. Fill in the details for each gift or contr   | ibution.                                 |  |                       |
|            | Gifts or contributions to charities   | Describe what you contribute             | d Date you                                 | Value                 |
|            | that total more than \$600  |  | contributed                                |                       |
|            |   |  |  |                       |
|            | Charity's Name  |  |  |                       |
|            |   |  |  |                       |
|            |   |  |  |                       |
|            | Number Street   |  |  |                       |
|            | City State Zip Code   |  |  |                       |
|            | Oity State Zip Code   |  |  |                       |
| 6:         | List Certain Losses   |  |  |                       |
|            |   |  |  |                       |
| Wit        | hin 1 year before you filed for bankruptcy of   | or since you filed for bankruptcy, did y | ou lose anything because of theft, fire    | e, other disaster, or |
| gar        | nbling?   |  |  |                       |
| <b>✓</b>   | No  |  |  |                       |
| П          | Yes. Fill in the details.   |  |  |                       |
|            | Describe the property you lost and  | Describe any insurance cove              | rage for the loss Date of your             | Value of property     |
|            | how the loss occurred   | Include the amount that insurar          |  | lost                  |
|            |   | pending insurance claims on lin          | e 33 of <i>Schedule</i>                    |                       |
|            |   | A/B: Property.                           |  |                       |
|            |   |  |  |                       |
| 7:         | List Certain Payments or Transfers  |  |  |                       |
|            | No<br>Yes. Fill in the details.   |  |  |                       |
| lacksquare | res. I iii ii i ti le details.  |  |  |                       |
|            |   |  |  |                       |
|            |   | Description and value of any paragraph   |  |                       |
|            |   | Description and value of any particles   | oroperty Date payment or transfer was made | Amount of payment     |
|            | Semrad Law Firm   | transferred                              | or transfer                                |                       |
|            | Person Who Was Paid   |  | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid<br>20 S. Clark Street   | transferred                              | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid<br>20 S. Clark Street<br>Number Street  | transferred                              | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid<br>20 S. Clark Street   | transferred                              | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid 20 S. Clark Street Number Street  28th Floor Chicago Illinois 60603   | transferred                              | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid 20 S. Clark Street Number Street 28th Floor   | transferred                              | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois 60603  City State Zip Code   | transferred                              | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid 20 S. Clark Street Number Street  28th Floor Chicago Illinois 60603   | transferred                              | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois 60603  City State Zip Code   | transferred                              | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois 60603  City State Zip Code  Email or website address   | transferred                              | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois 60603  City State Zip Code  Email or website address   | transferred                              | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois 60603  City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid                                     | transferred                              | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois 60603  City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  | transferred                              | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois 60603  City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid                                     | transferred                              | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois 60603  City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street                      | Attorney's Fee - 0.00                    | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois 60603  City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid                                     | Attorney's Fee - 0.00                    | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois 60603  City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street                      | Attorney's Fee - 0.00                    | or transfer<br>was made                    | payment               |
|            | Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois 60603  City State Zip Code  Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street  City State Zip Code | Attorney's Fee - 0.00                    | or transfer<br>was made                    | payment               |

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| 1 Sarai  |   | Marks  | Case number (if know  | n)   |   |
|--|---|--|---|--|---|
| First Name Middl   | e Name  | Last Name  |   |  |   |
| lp you deal with your creditors or to  | make payme  | ents to your creditors?  | oehalf pay or transfe   | er any property to an  | nyone who promised to   |
| No   |   |  |   |  |   |
| Yes. Fill in the details.  |   |  |   |  |   |
|  |   | Description and value of any p transferred   | property  | Date payment or transfer was made  | Amount of payment   |
| Person Who Was Paid  |   |  |   |  |   |
| Number Street  |   |  |   |  |   |
| City State Zi  | p Code  |  |   |  |   |
| clude both outright transfers and transfe<br>d transfers that you have already listed of<br>No | ers made as se  | ecurity (such as the granting of a sec   | curity interest or mortg  | gage on your property  | ). Do not include gifts   |
| res. Fill III the details.   |   | Description and value of prope   | ertv Describe a   | ny property or   | Date  |
|  |   | transferred  | payments r  | eceived or debts pa  |   |
| Person Who Received Transfer   |   |  |   |  |   |
| Number Street  |   |  |   |  |   |
| City State Zi<br>Person's relationship to you  | p Code  |  |   |  |   |
| Person Who Received Transfer   |   |  |   |  |   |
| Number Street  |   |  |   |  |   |
| City State Zi<br>Person's relationship to you  | p Code  |  |   |  |   |
| neficiary?   |   | you transfer any property to a se  | lf-settled trust or sin   | milar device of whic   | h you are a   |
| No   |   |  |   |  |   |
| 1 100. Till litule details.  |   | Description and value of the   | property transferred  | i  | Date transfer was made  |
| Name of trust  |   |  |   |  |   |
|  | First Name Middle Sthin 1 year before you filed for banks alp you deal with your creditors or to not include any payment or transfer the No Yes. Fill in the details.  Person Who Was Paid Number Street  City State Zinthin 2 years before you filed for banks or clude both outright transfers and transfer did transfers that you have already listed of transfers.  Person Who Received Transfer  Number Street  City State Zingerson's relationship to you  Ithin 10 years before you filed for barries are often called asset-protection deals are often called asset-protection deals. | thin 1 year before you filed for bankruptcy, did ye lip you deal with your creditors or to make payment on tinclude any payment or transfer that you listed of the present who was Paid  No Yes. Fill in the details.  Person Who Was Paid  Number Street  City State Zip Code  Ithin 2 years before you filed for bankruptcy, did ye ordinary course of your business or financial afficitude both outright transfers and transfers made as sed transfers that you have already listed on this statem of the present who Received Transfer  No Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  Ithin 10 years before you filed for bankruptcy, did the ficiary? The sear often called asset-protection devices.)  No Yes. Fill in the details. | thin 1 year before you filed for bankruptcy, did you or anyone else acting on your to you deal with your creditors or to make payments to your creditors? not include any payment or transfer that you listed on line 16.  No Yes. Fill in the details.  Description and value of any parasferred  Person Who Was Paid  Number Street  City State Zip Code  thin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transe or ordinary course of your business or financial affairs?  Jude both outright transfers and transfers made as security (such as the granting of a sec d transfers that you have already listed on this statement.  No Yes. Fill in the details.  Description and value of property of the person who Received Transfer  Number Street  City State Zip Code Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  thin 10 years before you filed for bankruptcy, did you transfer any property to a semeficiary?  nese are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of the | thin 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer by you deal with your creditors or to make payments to your creditors?  No  Yes, Fill in the details.  Description and value of any property transferred  Person Who Was Paid  Number Street  Dity State Zip Code  thin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to a dransfers that you have already listed on this statement.  No  Yes, Fill in the details.  Description and value of property to a self-settled trust or sin exchange and the details.  Description and value of property to a self-settled trust or sin exchange that in the details.  Description and value of property transferred transfers that you have already listed on this statement.  Description and value of property transferred transferred transferred transferred transferred to a payments in exchange that the property transferred transferr | Ithin 1 years before you filed for bankruptcy, did you anyone else acting on your behalf pay or transfer any property to are fip you deal with your creditors or to make payments to your creditors?  No Yes, Fill in the details.    Description and value of any property transfer was made |

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Debtor 1 Sarai Marks Case number (if known) First Name Middle Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

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Marks Debtor 1 Sarai Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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| Deb  | tor 1 |   |                 |                 | Marks               |          | Ca              | se number (/  | f known)               |   |     |
|------|-------|---|-----------------|-----------------|---------------------|----------|-----------------|---------------|------------------------|---|-----|
|      |       | First Name                              |                 | Middle Name     | Last Nam            | е        |                 |               |                        |   |     |
| 26.  | Hav   | e you been a party                      | y in any judici | al or administr | rative proceeding   | j under  | any environme   | ental law? Ir | nclude settlements an  | d orders.                                   |     |
|      |       | No<br>Yes. Fill in the det              | ails.           |                 |                     |          |                 |               |                        |   |     |
|      |       |   |                 |                 | Court or agency     |          |                 | Nature        | of the case            | Status of the case                          | е   |
|      |       | Case title                              |                 |                 | Court Name          |          |                 |               |                        | Pending                                     |     |
|      |       | Case number                             |                 |                 | NumberStreet        |          |                 |               |                        | On appe                                     |     |
|      |       |   |                 |                 | City Si             | tate     | Zip Code        |               |                        | Conclud                                     | led |
| Part | t 11: | Give Details Ab                         | oout Your B     | usiness or Co   | onnections to A     | ny Bus   | siness          |               |                        |   |     |
| 27.  | Witl  | nin 4 years before                      | you filed for b | ankruptcy, dic  | d you own a busin   | ess or l | have any of the | e following o | connections to any bus | siness?                                     |     |
|      |       |   |                 |                 | ade, profession, d  |          | -               |               | part-time              |   |     |
|      |       | A member of A partner in a              |                 | iity company (L | LC) or limited liab | ошту ра  | rtnersnip (LLP) |               |                        |   |     |
|      |       | An officer, die                         | rector, or mar  |                 | e of a corporatio   |          |                 |               |                        |   |     |
|      |       |   |                 |                 | equity securities o | f a corp | ooration        |               |                        |   |     |
|      | Z     | No. None of the a<br>Yes. Check all tha |                 |                 |                     | each h   | usiness         |               |                        |   |     |
|      | Ц     | roo. Grook an are                       | ar apply abov   |                 |                     |          | re of the busin | ess           |                        | tion number Do not                          |     |
|      |       |   |                 |                 |                     |          |                 |               | EIN:                   | urity number or ITIN.                       |     |
|      |       | Business Name                           |                 |                 |                     |          |                 |               |                        |   |     |
|      |       | Number Street                           |                 |                 | Name of a           | ccounta  | ant or bookkee  | per           | Dates business exis    | ited  |     |
|      |       | City                                    | State           | Zip Code        |                     |          |                 |               | FromTo                 |   |     |
|      |       |   |                 |                 |                     |          |                 |               |                        |   |     |
|      |       |   |                 |                 | Describe the        | he natu  | re of the busin | ess           |                        | tion number Do not urity number or ITIN.    |     |
|      |       | Business Name                           |                 |                 | _                   |          |                 |               | EIN:                   |   |     |
|      |       | Number Street                           |                 |                 | _                   |          |                 |               | Dates business exis    | ted   |     |
|      |       | City                                    | State           | Zip Code        | Name of ac          | ccounta  | ant or bookkee  | per           | From To                |   |     |
|      |       | Oity                                    | Otate           | Zip Oode        |                     |          |                 |               | FromTo                 |   |     |
|      |       |   |                 |                 |                     |          |                 |               |                        |   |     |
|      |       |   |                 |                 | Describe to         | he natu  | re of the busin | ess           |                        | tion number Do not<br>urity number or ITIN. |     |
|      |       | Business Name                           |                 |                 | _                   |          |                 |               | EIN:                   |   |     |
|      |       | Number Street                           |                 |                 | Name of a           | ccounts  | ant or bookkee  | per           | Dates business exis    | ited  |     |
|      |       | City                                    | State           | Zip Code        |                     | Journe   | or bookinge     |               | FromTo                 |   |     |
|      |       |   |                 |                 |                     |          |                 |               |                        |   |     |

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| Debt     | tor 1 Sarai                    |                     |                      | Marks                         | Case number (if known)  |
|----------|--------------------------------|---------------------|----------------------|-------------------------------|---|
|          | First Name                     |                     | Middle Name          | Last Name                     |   |
| 28.      | Within 2 years creditors, or o |                     | r bankruptcy, did yo | ou give a financial statemer  | nt to anyone about your business? Include all financial institutions,   |
|          | Yes. Fill in                   | the details below.  |                      |                               |   |
|          | _                              |                     |                      | Date issued                   |   |
|          |                                |                     |                      | <u> </u>                      |   |
|          | Name                           |                     |                      | MM/DD/YYYY                    |   |
|          | Number                         | Street              |                      | <del>_</del>                  |   |
|          | Number                         | Gircot              |                      |                               |   |
|          | City                           | State               | Zip Code             | _                             |   |
|          | 12: Sign Be                    | la                  |                      |                               |   |
| Part     | Sign be                        | IOW                 |                      |                               |   |
| t        | rue and correc                 | t. I understand tha | t making a false sta | tement, concealing proper     | nts, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|          | ×                              |                     |                      |                               | ×   |
|          | •                              | /s/ Sarai Marks     | d                    |                               | · · · · · · · · · · · · · · · · · · ·   |
|          |                                | Signature of Debto  | rı                   |                               | Signature of Debtor 2   |
|          |                                | Date 9/17/2018      |                      |                               | Date  |
|          | Did vou attach                 | additional pages to | Your Statement of    | Financial Affairs for Individ | uals Filing for Bankruptcy (Official Form 107)?   |
|          |                                |                     |                      |                               | , (, (,,,,,   |
| <u> </u> | ✓ No                           |                     |                      |                               |   |
| L        | Yes                            |                     |                      |                               |   |
|          | Did you pay or a               | agree to pay some   | ne who is not an at  | torney to help you fill out b | ankruptcy forms?  |
| Į.       | <b>√</b> No                    |                     |                      |                               |   |
| į        | Yes. Name                      | of person           |                      |                               | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).  |

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B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

|     |   | Northern Dist                | inct of initiols   |                                |  |  |  |  |
|-----|---|------------------------------|--|--------------------------------|--|--|--|--|
| re_ | Sarai Marks   |                              | Case No.   |                                |  |  |  |  |
|     | Debtor  |                              |  | (If known)                     |  |  |  |  |
|     |   |                              | Chapter  | Chapter 13                     |  |  |  |  |
|     | DISCLOSURE OF   | COMPENSATION                 | ON OF ATTORNEY   | FOR DEBTOR                     |  |  |  |  |
| 1   | Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf  | year before the filing of th | e petition in bankruptcy, or agreed  | to be paid to me, for services |  |  |  |  |
|     | For legal services, I have agreed to ac   | cept                         |  | \$4,000.00                     |  |  |  |  |
|     | Prior to the filing of this statement I h   | ave received                 |  | \$0.00                         |  |  |  |  |
|     | Balance Due   |                              |  | \$4,000.00                     |  |  |  |  |
| 2   | . The source of the compensation paid   | to me was:                   |  |                                |  |  |  |  |
|     | <b>✓</b> Debtor   | Other (specif                | y)   |                                |  |  |  |  |
| 3   | . The source of the compensation paid   | to me is:                    |  |                                |  |  |  |  |
|     | <b>✓</b> Debtor   | Other (specif                | y)   |                                |  |  |  |  |
| 4   | I have not agreed to share the abomembers and associates of my la   |                              | ion with any other person unless th  | ney are                        |  |  |  |  |
|     | I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. |                              |  |                                |  |  |  |  |
| 5   | . In return for the above-disclosed fee,<br>a. Analysis of the debtor's finan-<br>bankruptcy;   | •                            | gal service for all aspects of the bar<br>ng advice to the debtor in determini |                                |  |  |  |  |
|     | b. Preparation and filing of any p  | petition, schedules, statem  | nents of affairs and plan which may  | / be required;                 |  |  |  |  |
|     | c. Representation of the debtor   | at the meeting of creditors  | s and confirmation hearing, and any  | y adjourned hearings thereof;  |  |  |  |  |
|     | d. Representation of the debtor   | in adversary proceedings a   | and other contested bankruptcy ma  | atters;                        |  |  |  |  |
| 6   | . By agreement with the debtor(s), the  | above-disclosed fee does     | not include the following services:  |                                |  |  |  |  |
|     |   |                              |  |                                |  |  |  |  |
|     |   | CERTIFI                      | CATION   |                                |  |  |  |  |
|     | certify that the foregoing is a completeor(s) in this bankruptcy proceedings.   | e statement of any agreem    | nent or arrangement for payment to   | me for representation of the   |  |  |  |  |
|     | 9/17/2018   |                              | /s/ Mike Miller  |                                |  |  |  |  |
|     | Date  |                              | Signature of Attorney  |                                |  |  |  |  |
|     |   |                              | Semrad Law Firm  |                                |  |  |  |  |
|     |   |                              | Name of law firm   |                                |  |  |  |  |

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B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

| 0.00                             |  | Northern Distric                             |   |  |  |  |  |
|----------------------------------|--|--|---|--|--|--|--|
| n re                             | Sarai Marks<br>Debtor  | <del></del>                                  | Case No.  | (If known)   |  |  |  |
|                                  | Author y ser s   |  | Chapter   | Chapter 13   |  |  |  |
| D                                | ISCLOSURE O  | E COMPENSATION                               | N OF ATTORNEY F   | OP DEPTOP  |  |  |  |
|                                  |  |  |   |  |  |  |  |
| comper                           | ensation paid to me within o   | one year before the filing of the pe         | that I am the attorney for the abo<br>etition in bankruptcy, or agreed to<br>tion of or in connection w ith the | be paid to me, for services  |  |  |  |
| For leg                          | al services, I have agreed to  | o accept                                     |   | \$4,000.00   |  |  |  |
| Prior to                         | o the filing of this statemer  | t I have received                            |   | \$0.00   |  |  |  |
| Balance                          | e Due  |  |   | \$4,000.00   |  |  |  |
| 2. The sou                       | urce of the compensation   | paid to me was:                              |   |  |  |  |  |
|                                  | <b>✓</b> Debtor  | Other (specify)                              |   |  |  |  |  |
| 3. The sou                       | urce of the compensation   | paid to me is:                               |   |  |  |  |  |
|                                  | <b>✓</b> Debtor  | Other (specify)                              |   |  |  |  |  |
| 4. I ha                          | ave not agreed to share the<br>embers and associates of n                                | above-disclosed compensation<br>by law firm. | with any other person unless the  | y are  |  |  |  |
| me                               | ave agreed to share the abo<br>embers or associates of my<br>e people sharing in the con | law firm. A copy of the agreemen             | n a other person or persons who a<br>nt, together with a list of the name                                       | ere not<br>s of  |  |  |  |
|                                  |  |  | service for all aspects of the bank   | [1] - 1 [ - 1] - 1 [ |  |  |  |
| a.                               | Analysis of the debtor's fit bankruptcy;   | nancial situation, and rendering a           | dvice to the debtor in determining  | g whether to file a petition in  |  |  |  |
| b.                               | Preparation and filing of a  | ny petition, schedules, statement            | ts of affairs and plan which may b  | e required;  |  |  |  |
| c.                               | Representation of the deb  | tor at the meeting of creditors and          | d confirmation hearing, and any a   | djourned hearings thereof;   |  |  |  |
| d.                               | Representation of the deb  | tor in adversary proceedings and             | other contested bankruptcy matte  | ers;   |  |  |  |
| 6. By agre                       | ement with the debtor(s), t  | he above-disclosed fee does not              | include the following services:   |  |  |  |  |
|                                  |  |  |   |  |  |  |  |
|                                  |  | CERTIFICA                                    | TION  |  |  |  |  |
| I certify the<br>debtor(s) in ti | hat the foregoing is a comp<br>his bankruptcy proceeding                                 | olete statement of any agreement is.         | or arrangement for payment to m   | e for representation of the  |  |  |  |
|                                  | 9/17/2018  |  | /s/ Mike Miller   |  |  |  |  |
|                                  | Date Signature of Attorney   |  |   |  |  |  |  |
|                                  |  |  | Semrad Law Firm   |  |  |  |  |
|                                  |  |  | Name of law firm  |  |  |  |  |



#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

#### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.



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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case
  is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in
  this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the
  debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities
  under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the
  attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$353.23
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$43.23 for expenses, leaving a balance due of \$4,353.23
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date:    | 9/17/2018     |                        |  |
|----------|---------------|------------------------|--|
| Signed:  |               |                        |  |
| /s/ Sara | i Marks       |                        |  |
| 20       | May any welly | /s/ Mike Miller        |  |
| Debtor(s | s)            | Attorney for Debtor(s) |  |

Do not sign if the fee amounts at top of this page are blank.

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#### THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

Re: Agreement Regarding Priority Treatment of The Semrad Law Firm LLC's Fees and Expenses

Dear Sarai Marks.

Thank you for choosing The Semrad Law Firm LLC (the Firm) to represent you in connection with your Chapter 13 bankruptcy case. In addition to the terms contained in the Court Approved Retention Agreement (CARA) it is our policy to confirm in writing how and when the Firm's fees and expenses will be paid. If there are any terms contained in this document that are in conflict with CARA, those terms are void.

Aside from any initial retainer that you pay the Firm, you will be required to pay the Firm's fees and expenses through the Chapter 13 plan after it is approved by the Bankruptcy Court. Each month, you will pay the Trustee the amount stated in your Chapter 13 plan. The Trustee will then disburse that money out according to the provisions of your plan to the Firm and other creditors.

The model Chapter 13 plan gives fourth priority to attorneys' fees, after the Trustee's fees, current mortgage payments, and payments to secured creditors listed in Section 3.1, 3.2, or 3.3 (for example, payments due to lenders on a loan to purchase a car, furniture, appliance or other item of personal property). The Firm intends to alter this priority scheme by modifying the model Chapter 13 plan to provide for payment of the Firm's attorney's fees and costs before any payments are made to your other creditors. That means that the money you send to the Trustee each month will first be paid to the Firm and not to pay the claims of your other creditors until the Firm's fees and expenses are paid in full. Such claims of other creditors include your car note, other financed personal property, parking tickets, taxes, and any claims of other creditors that may be included in your plan.

Aside from the Firm's commitment to perform any and all work reasonably necessary to represent you in this bankruptcy case without requiring you to pay a substantial amount of the fees and expenses up front, there is no benefit to you from this priority treatment of the Firm's fees and expenses. Furthermore, this arrangement presents certain risks. In the event that your case is dismissed before completion of the plan or if you decide to convert your case to a case under Chapter 7, it is likely that the Firm's attorneys' fees will have been paid while little of your other debts are paid.

In addition, there is the possibility that a creditor or the Trustee may object to the Firm being paid under this altered priority arrangement. In the event of such an objection, the Firm may lower that amount that the Firm will receive each month and increase the

#### THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

monthly payment to such creditor in order to resolve the objection. However, creditors may seek to recover additional attorneys' fees as a result of any such objection and you may be required to pay the creditors' additional attorneys' fees over time through the Chapter 13 Plan.

A Chapter 13 plan will be filed on your behalf to repay your creditors. Your Chapter 13 plan payment will be \$190.00 at the time of filing. This monthly Chapter 13 plan payment can be subject to change during your case. Included within this monthly plan payment is the Firm's compensation for representing you during the Chapter 13. You will be paying the Firm an attorney fee of \$4,000.00, with an initial down payment of \$0.00.

Within the Chapter 13 plan payment, you will be paying back your creditors and the Firm's attorney fees:

- 1. The trustee will be paid an estimated 6% of the plan payment.
- 2. The Firm's fees will be paid at approximately \$175.00/mo.
- 3. General Unsecured Creditors will be paid 10% pro-rata after all other creditors.

If you do not wish to pay the Firm's attorneys' fees and expenses ahead of your creditors as set forth above, you have the following options:

- A. You can elect to pay the Firm an upfront retainer of \$1,500 prior to filing your case and elect for the plan to pay your car note (and/or other claims secured by personal property) and mortgage arrears in equal set monthly payments along with the Firm's fees and expenses; or
- B. You can seek representation by another firm under a different payment arrangement.

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#### THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

Please carefully review this letter. If the terms are not consistent with your understanding of our engagement in any respect or if you have any questions concerning the same, please notify us promptly. You can also seek advice from other counsel regarding your rights under this arrangement. Firm policy and a prior court order require that we receive confirmation of your acceptance of these terms in the form of your signature at the bottom of this letter. Please return the signed copy to the Firm as soon as possible.

Very Truly Yours,

THE SEMRAD LAW FIRM LLC

Accepted:

Sarai Marks

Date: 9/17/2018

in Mals

### **CHAPTER 13 DISCLAIMERS**

| 1. | tunderstand that if I owe attorney's fees, those fees will be paid through the Chapter 13 plan and to the extent allowed by the Bankruptcy Court, The Semrad Law Firm will likely be paid before any of my creditors are paid.   |
|----|--|
| 2. | I understand that The Semrad Law Firm has pulled a credit report, but that said credit report does not report every debt I owe. I understand that it is my responsibility to provide all my debts to The Semrad Law Firm to list in my bankruptcy, and that failure to list a debt could be grounds for said debt(s) being not discharged in my case.  |
|    |  |
| 3. | I agree that in the preparation of my bankruptcy petition and schedules that I have disclosed to The Semrad Law Firm all my debts, sources of income, assets, personal property, real estate, transfers of real estate over the past 4 years, and expenses.  |
|    | Sm   |
| 4. | I agree that I will attend my creditors meeting at the time, date and location that will be given to me by The Semrad Law Firm, and also mailed to me by the Bankruptcy Court. That at this meeting I will bring my driver's license or State ID, my social security card, and a recent pay stub if I am working. That failure of me to attend this meeting is grounds for my case to be dismissed. I also understand that failure to bring said requested documents to the meeting can be grounds for the meeting to not be held. |
| 5. | I understand that The Semrad Law Firm will be paid first before all creditors unless otherwise agreed or ordered by the court.   |
| 6. | I understand that my first trustee payment is due 30 days after the filing of my bankruptcy case, and every 30 days thereafter. I agree to make my trustee payment every 30 days, and that failure to make my trustee payments is grounds to have my case dismissed.   |
|    |  |
| 7. | I acknowledge that I have authorized The Semrad Law Firm to submit a payroll control order on my behalf (if applicable) to have my payment deducted from my payroll check each pay period.   |
|    | SM   |
|    |  |
|    |  |

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| 8.  | I understand that if a payroll control order is being submitted, that it is unknown when the trustee payments will be deducted out of my paycheck (usually takes one to two months). I also agree to make my Trustee payment directly myself to the Trustee until I see the deductions come out of my paycheck.   |
|-----|---|
| 9.  | I understand and agree that it is ultimately my responsibility to make my trustee payments each month and monitor my paycheck each pay period to ensure that not only that the deduction is coming out of my paycheck, but also that it is the correct amount. I agree that if for some reason the trustee payment stops coming out of my paycheck, or I leave my job that it is my responsibility to make my trustee payments directly to the Trustee. |
| 10. | I understand that when making a trustee payment directly to the Trustee, it can only be made by money order or certified check, and that a personal check or cash cannot be sent to the Trustee.  |
| 11. | I agree that I am contributing all the disposable income I have available toward my Chapter 13 plan, and that if my plan is paying my unsecured creditors less than 100%, that the Bankruptcy Trustee can ask that my future tax refunds be tendered to my case while I am in my bankruptcy case.   |
| 12. | I understand that if I want to incur credit such as to finance a car or real estate that I need court permission, and agree that I must contact my attorney to obtain such permission.  |
| 13. | I understand that I must have filed my federal and state tax returns for the past 4 years if I was legally required to, and failure to have done so is grounds to have my case dismissed.   |
| 14. | I understand that if I am legally required by court order to pay domestic support obligations (child support, alimony), that falling in default is grounds to have my case dismissed and/or not receive a discharge in my case.   |
| 15. | I understand that my Chapter 13 plan will run between 36 and 60 months, depending on the amount of debt I have, and what the bankruptcy court requires my plan to run.  |

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| 16. | I understand and agree to complete my 2nd credit counseling exit course before my case ends, and submit a copy of the certificate showing I completed this to my attorney. I also understand that failure to complete this requirement before my case ends is grounds to not receive my discharge.  |
|-----|---|
| 17. | If I have a garnishment coming out of my paycheck, I agree and understand that it is my responsibility to provide my payroll department with proof of my bankruptcy to stop said wage garnishment. It also my responsibility to contact the garnishing creditor and provide them with proof of my filing.   |
| 18. | If a garnishment or voluntary deduction is coming out of my bank account, I agree that it is my responsibility to contact my bank to stop said deduction or garnishment by providing proof of bankruptcy, or requesting my bank to close my account and open a new account.   |
| 19. | I understand that my monthly Trustee payment is not finalized and may increase or decrease due to a difference in my income, expenses, and/or my debt amounts.  |
| 20. | I agree that I authorized The Semrad Law Firm to file my bankruptcy case, after I reviewed my bankruptcy petition and schedules.  |
| 21. | I understand that the entire firm of The Semrad Law Firm represents me, and that while a different attorney might have counseled me and prepared my case, that once my case is filed, one of the attorneys at The Semrad Law Firm will be assigned as my attorney for the remainder of my case.   |
| 22. | I understand that if I have had (1) bankruptcy dismissed in the last 12 months, that I only have the benefit of the automatic stay for 30 days, until a motion is granted by the judge extending the automatic stay protection for the remainder of the case. That if the Judge denies my motion to extend the automatic stay that it is possible that creditors will still be able to take actions such as foreclosing on my real property, repossessing any vehicles, and garnishing my monies. |

| 23. | I understand that if I have had (2) or more bankruptcies dismissed in the last 12 months, that I do      |
|-----|--|
|     | not have the benefit of the automatic stay upon the filing of the case, until a motion is granted by the |
|     | judge imposing the automatic stay protection for the remainder of the case. Until the Judge grants       |
|     | such motion none of my property including my real property, cars or monies are not protected. That       |
|     | if the Judge denies my motion to impose the automatic stay that creditors will still be able to take     |
|     | actions such as foreclosing on my real property, repossessing any vehicles, and garnishing my            |
|     | monies.  |

24. I understand that if I owe any taxing authority such as the IRS or State of Illinois any income tax debt, that even though I am required to put this debt into my Chapter 13 plan, that tax authorities still have the legal right to offset my next tax refund by the amount(s) they are owed.

CH13

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### NO APPRAISAL DISCLAIMER

I/ We understand that our attorneys, The Semrad Law Firm, LLC have advised us to obtain a licensed real estate appraisal before proceeding with the filing of a Chapter 7, to ensure there is not sufficient equity in our home(s) where it could be potentially liquidated by the Chapter 7 Trustee. After being advised of aforementioned, I/ We have decided to obtain real estate comparables in lieu of an appraisal. In addition, I/ We agree to not hold The Semrad Law Firm, LLC liable in the event that our property is determined to have equity, and if the Chapter 7 Trustee attempts to liquidate said property(ies).

| Saral Marks | 9-4-18 |
|-------------|--------|
| Client      | Date   |
| Client      | Date   |

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### BANKRUPTCY OVERVIEW VIDEO DISCLAIMER

I have reviewed the Bankruptcy Overview Video and feel I understand all of the information that was covered in the video. I have asked any questions that I might have had regarding the information covered in the video. I also understand that the video is available online for future reference at <a href="http://www.debtstoppers.com/bankruptcy/chapter-13/">http://www.debtstoppers.com/bankruptcy/chapter-13/</a>.

| Sargi Marks | 9-4-18 |
|-------------|--------|
| Client      | Date   |
| W o         | ¥ (    |
| Client      | Date   |

### **DISCLOSURE OF AFTER ACQUIRED PROPERTY**

I understand and agree that it is my responsibility to disclose any after-acquired property, including, but not limited to, a personal injury lawsuit or inheritance. I further understand if I file a Chapter 13 bankruptcy that the after-acquired property may alter the terms of my confirmed Chapter 13 Plan.

| Sargi Marks | 9-4-18 |
|-------------|--------|
| Client      | Date   |
| Client      | Date   |

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### NO DISCHARGE DISCLAIMER

I understand and have been advised by The Semrad Law Firm that I am not eligible to receive a discharge in my Chapter 13 bankruptcy, due to a previous filed bankruptcy. I understand that upon completion of my plan payments, I will still owe my creditors any unpaid balances that were not paid in my Chapter 13 plan. Additionally I understand that even if my case is paying back 100% of my unsecured creditors, I legally will owe any accrued contract interest. Any creditors who do not file claims in my case as well will still be owed their entire claim after closing of my case. Lastly, I understand that if I am proposing to pay back a vehicle loan inside my Chapter 13, that I will not receive my title upon completion of my case, unless I proposed to pay back the full contractual balance and contract rate of interest.

After being advised of a no discharge case, I still wish to proceed to obtain automatic stay relief under the Bankruptcy Code in the filing of a Chapter 13.

| Sarai Warks | 9-4.8 |
|-------------|-------|
| Client      | Date  |
| Client      | Date  |

### WAIVER OF POSSIBLE CONFLICT OF INTEREST

You have requested that The Semrad Law Firm LLC ("the firm") represent you in the filing of this petition for bankruptcy subsequent to the firm's filing of a previous bankruptcy petition on your behalf. Please be advised that any debt that you owe the firm for services rendered with respect to your prior bankruptcy will be a dischargeable debt should you file a subsequent bankruptcy regardless of what law firm you retain. For this reason and as we discussed, the fact that there is a balance owed to the firm for legal services provided prior to the filing of this bankruptcy petition gives rise to a potential conflict between your interests and the financial interests of the firm. Regardless of whether you decide to retain the firm at this time, the firm hereby waives any claim to any remaining unpaid balance for fees owed from your prior case. Accordingly, at this time, we do not perceive this potential conflict arising out of prior unpaid fees that we have waived will preclude our ability to represent you in the filing of this bankruptcy petition. However, it is your right to consult with separate counsel of your choice regarding the potential conflict and whether it is in your best interests for the firm to continue to represent you.

If you have made a payment to the firm for fees owed with respect to the firm's services in your previous representation during the 90 days prior to consulting the firm about filing this bankruptcy petition, please be advised that such a payment has the potential to be found a preferential payment under the Bankruptcy Code. In such an instance, the firm may be a potential defendant in a preference action whereby the standing Trustee may seek return of those funds to pay your creditors. At this time, we do not perceive that such a potential conflict between your interests and the firm's financial interests precludes our ability to represent you in the filing of a new bankruptcy petition. If the Trustee would initiate such an action the firm will discuss whether it can still represent you. However, it is your right to consult with separate counsel of your choice regarding the potential conflict and whether it is in your best interests for the firm to continue to represent you.

Please be further advised, that it is your right to file bankruptcy with any attorney of your choice.

After being advised of these potential conflicts of interest and your right to consult with separate counsel of your choice regarding those potential conflicts, should you desire to continue with the firm's representation, please sign below.

| Dargi Warks | 9-4-18 |
|-------------|--------|
| Client      | Date   |
| Client      | Date   |

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#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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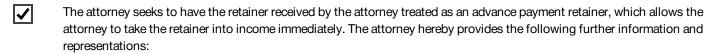
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

  However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. *Discharge of the attorney*. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$353.23
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$43.23 for expenses, leaving a balance due of \$4,353.23
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date:    | 9/17/2018 |                        |
|----------|-----------|------------------------|
| Signed:  | :         |                        |
| /s/ Sara | ii Marks  |                        |
|          |           | /s/ Mike Miller        |
| Debtor(  | s)        | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1.717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc">http://www.justice.gov/ust/eo/hapcpa/ccde/cc</a> approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Marks, Sarai                              | Case No.  |                                      |
|-----------------|---|---|--------------------------------------|
|                 | Debtor(s)                                 | Case No.  |                                      |
|                 |   | Chapter.  | Chapter13                            |
|                 | VERIFICA                                  | ATION OF CREDITOR MAT                               | TRIX                                 |
| Th<br>knowledge | ne above named Debtors hereby verify to a | that the attached list of creditors is t            | rue and correct to the best of their |
| Date:           | 9/17/2018                                 | /s/ Marks, Sarai<br>Marks, Sarai<br>Signature of De |                                      |

EDC/PANGEA REAL ESTATE PO Box 809009 Chicago, IL, 60680

CREDMGMTCNTL P.O. BOX 1654 GREEN BAY, WI, 54301

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

Arnold Scott Harris 111 W. Jackson # 600 Chicago, IL, 60604

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| Debtor 1 Sarai<br>First Name  | Middle Name   | Marks<br>Last Name                        | _ Case number (if known) _   |  |  |
|---|---|---|--|--|--|
| Part 6: Answer These Qu   | estions for Reporting Purpose   |   |  |  |  |
| 16. What kind of debts do<br>you have?  | <ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.</li> <li>16c. State the type of debts you owe that are not consumer debts or business debts.</li> </ul>   |   |  |  |  |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that  No.   | er 7. Do you estimate that                | after any exempt propert<br>distribute to unsecured cr                 | y is excluded and administrative<br>reditors?  |  |
| 18. How many creditors do you estimate that you owe?  | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999   | 1,000-5,000<br>5,001-10,00<br>10,001-25,0 | 00   | 25,001-50,000<br>50,001-100,000<br>More than 100,000   |  |
| 19. How much do you estimate your assets to be worth?   |   | \$10,000,00<br>\$50,000,00                | -\$10 million  | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |  |
| 20. How much do you estimate your liabilities to be?  Part 7: Sign Below  | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$50,000,00                               | -\$10 million<br>1-\$50 million<br>1-\$100 million<br>01-\$500 million | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |  |
| For you   | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.   |   |  |  |  |
|   | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  **  /s/ Sarai Marks  Signature of Debtor 1  Signature of Debtor 2 |   |  |  |  |
|   | Executed on 9/17/2018   | D/YYYY                                    | Executed on _  | MM / DD / YYYY   |  |

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| Debtor 1                                | Sarai      | Marks       |                      |  |
|---|------------|-------------|----------------------|--|
|   | First Name | Middle Name | Last Name            |  |
| Debtor 2                                |            |             |                      |  |
| (Spouse, if filing)                     | First Name | Middle Name | Last Name            |  |
| United States Bankruptcy Court for the: |            | Northern    | District of Illinois |  |
| Case number<br>(If known)               |            |             | (State)              |  |

Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Part 1: Sign Below   |   |  |  |  |  |
|--|---|--|--|--|--|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?  |   |  |  |  |  |
| ☑ No   |   |  |  |  |  |
| Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |  |  |  |
|  |   |  |  |  |  |
|  |   |  |  |  |  |
| Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. |   |  |  |  |  |
| * /s/ Sarai Marks Signature of Debtor 1  | Signature of Debtor 2   |  |  |  |  |
| Date 9/17/2018 MM/DD/YYYY  | Date MM/DD/YYYY   |  |  |  |  |

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| Debtor  |   | Mar                         | TO ALL STATE OF THE STATE OF TH | Case number (if known)  |  |  |
|---------|---|-----------------------------|--|---|--|--|
|         | First Name Mid  | dle Name Last               | Name   |   |  |  |
| 28. W   | ithin 2 years before you filed for bar<br>editors, or other parties.  | ıkruptcy, did you give a fi | nancial statement to   | anyone about your business? Include all financial institutions,   |  |  |
|         | Yes. Fill in the details below.   |                             |  |   |  |  |
|         | _   | Date                        | issued   |   |  |  |
|         | Name  | MM/DI                       | D/YYYY   |   |  |  |
|         | Number Street   |                             |  |   |  |  |
| ×.      | Number Street   |                             |  |   |  |  |
|         | City State  | Zip Code                    |  |   |  |  |
| Part 12 | Sign Below  |                             |  |   |  |  |
| rait 12 | e digit below   |                             |  |   |  |  |
| true    | and correct. I understand that ma   | king a false statement, co  | ncealing property, o   | and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |  |  |
|         | /s/ Sarai Marks   | Torsein Marci               | van x  |   |  |  |
|         | Signature of Debtor V   | Let we with                 | 00   | Signature of Debtor 2   |  |  |
|         | Date 9/17/2018  |                             |  | Date  |  |  |
| Did     | Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |                             |  |   |  |  |
| IJ      | No  |                             |  |   |  |  |
|         | Yes   |                             |  |   |  |  |
| Did     | you pay or agree to pay someone w   | ho is not an attorney to h  | elp you fill out bankı   | ruptcy forms?   |  |  |
|         | No  |                             |  |   |  |  |
|         | Yes. Name of person   |                             |  | Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).  |  |  |

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#### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re:  | Marks, Sarai                    | Cone No  |    |  |  |  |  |
|---|---------------------------------|--|----|--|--|--|--|
|   | Debtor(s)                       | Case No  |    |  |  |  |  |
|   |                                 | Chapter. Chapter13   |    |  |  |  |  |
|   | VERIFICATION OF CREDITOR MATRIX |  |    |  |  |  |  |
| The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge. |                                 |  |    |  |  |  |  |
| Date:   | 9/17/2018                       | /s/ Marks, Sarai Julen Ma<br>Marks, Sarai<br>Signature of Debtor | MA |  |  |  |  |

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| Debt    | or 1 Sarai<br>First Name   | Middle Name   | Marks<br>Last Name                                  | Case number (if known)   |             |  |
|---------|--|---|---|--|-------------|--|
| 16.     |  | family income that applies to   |   |  |             |  |
|         | 16a. Fill in the state in  |   | Illinois  |  |             |  |
|         |  | of people in your household.  | 4   |  |             |  |
|         |  | family income for your state and s  | ize of  |  | \$96,485.00 |  |
|         | household  |   | To find   | a list of applicable median income amounts, go online  | 450,400.00  |  |
| 17      |  |   | or this form. This list ma                          | y also be available at the bankruptcy clerk's office.  |             |  |
| 17.     | How do the lines com   | · · · · · · · · · · · · · · · · · · ·   | no top of page 1 of this f                          | orm, check box 1, Disposable income is not determined  |             |  |
|         | under 11 U.S   | S.C. § 1325(b)(3). Go to Part 3. D  | o NOT fill out <i>Calculation</i>                   | off, check box 1, <i>Disposable income is not determined</i> of <i>Disposable Income</i> (Official Form 122C-2). |             |  |
|         | U.S.C. § 132   | nore than line 16c. On the top of p<br>5(b)(3). <b>Go to Part 3 and fill out</b><br>our current monthly income from I | Calculation of Disposa                              | k box 2, Disposable income is determined under 11 ble Income (Official Form 122C-2). On line 39 of that          |             |  |
| Part    | 3: Calculate Your  | Commitment Period Under   | 11 U.S.C. §1325(b)(                                 | 4)   |             |  |
| 18.     |  | ge monthly income from line 11  |   |  | \$2,448.24  |  |
| 19.     | Deduct the marital accommitment period und   | djustment if it applies. If you are<br>der 11 U.S.C. § 1325(b)(4) allows  | married, your spouse is<br>you to deduct part of yo | not filing with you, and you contend that calculating the ur spouse's income, copy the amount from line 13.      |             |  |
|         |  | stment does not apply, fill in 0 on   |   |  | -\$0.00     |  |
|         | 19b. Subtract line 19a   | a from line 18.   |   |  | \$2,448.24  |  |
| 20.     | Calculate your curren  | t monthly income for the year.  | Follow these steps:                                 |  |             |  |
|         | 20a. Copy line 19b.  |   |   |  | \$2,448.24  |  |
|         | Multiply by 12 (the  | e number of months in a year).  |   |  | x 12        |  |
|         | 20b. The result is your  | current monthly income for the ye   | ar for this part of the form                        | ı.   | \$29,378.88 |  |
|         | 20c. Copy the median   | family income for your state and s  | ize of household from lin                           | e 16c.   | \$96,485.00 |  |
| 21.     | 21. How do the lines compare?  |   |   |  |             |  |
|         | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.             |   |   |  |             |  |
|         | Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. |   |   |  |             |  |
| Part    |  | ,   |   |  |             |  |
| 200-127 |  |   |   |  |             |  |
|         | By signing here, I c   | leclare under penalty of perjury tha  | t the information on this                           | statement and in any attachments is true and correct.  |             |  |
|         | * /s/ Sarai Marks Acuter Maly *  |   |   |  |             |  |
|         | Signature of De  |   |   | gnature of Debtor 2  |             |  |
|         | Date 9/17/20<br>MM/DD  |   | D   | MM/DD/YYYY   |             |  |
|         |  |   |   | WHM/DD/TTTT  |             |  |
|         |  | , do NOT fill out or file Form 122C<br>, fill out Form 122C-2 and file it w   |   | of that form, copy your current monthly income from line   | e 14        |  |